## PROJECT 10073 RECORD CARD

1. DATE  14 July 1962  3. DATE-TIME GROUP  Local  GMT 15/0030Z  5. PHOTOS	ROCK Hill, Sou  4 TYPE OF OBSERVATION  XXX Ground-Visual  30 X TX  Air-Visual  6. SOURCE		12. CONCLUSIONS  Was Balloon Probably Balloon Possibly Balloon  Was Aircraft Probably Aircraft Possibly Aircraft Probably Aircraft Probably Aircraft
XX No	Civilian		D Possibly Astronomical
7. LENGTH OF OBSERVATION	8. NUMBER OF OBJECTS	9. COURSE	Other     X Insufficient Data for Evaluation    Unknown
6 seconds	one	across moon	
10. BRIEF SUMMARY OF SIGHTING		11. COMMENTS	
Object viewed through 3 moon in about 6 seconds to NE. Silver color.		wide. Object about 500 miles object would Object probab	is about 2,100 miles as reported would be es long (if on moon). above Earth's surface be about a mile long. ly within telescope ce. Insufficient

ATIC FORM 329 (REV 26 SEP 52)

					Page 8
39. Do you think you can	estimate the spe	ed of the object?			
(Circle One)	Yes	No			
IF you answered YES	, then what speed	d would you estin	nate?		
40. Do you think you can	estimate how far	away from you t	he object was?		
(Circle One)	Yes	No			
IF you answered YE	S, then how far a	way would you se	y it was?		
41. Please give the follo	wing information.	about yourself:			
NAME	Last Name		First Name	ROBE SECTION AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF TH	Middle Name
ADDDESS TOTAL	The state of the s				
ADDRESS	Street		City	Zone	State
TELEPHONE NUMB					
I ELEFTICITE NUMB		THE RESIDENCE OF THE PARTY OF T			
Age	Sex				
indicate any addition	al information ab	out vourself inc	luding any education,	which might be no	rtinent.
		Water and the same	1		
	7	to the t	to be a true	- Carabana	talt + "
				The same of the	
			moderanded on	n other of	Lance -
42. Date you completed	this questionnaire	o:	Time A	Month	Y.ear
			Day	Month	1.00

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14

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## U.S. AIR FORCE TECHNICAL INFORMATION SHEET (SUMMARY DATA)

In order that your information may be filed and coded as accurately as possible, please use the following space to write out a short description of the event that you observed. You may repeat sinformation that you have already given in the questionnaire, and add any further comments, statements, for sketches that you believe are important. Try to present the details of the observation in the order in which they occurred. Additional pages of the same size paper may be attached if they are needed.

		THE PERSON NAMED IN		
NAME	HIERON STATE	(Please Print)		
	CHICAGO TO A CONTROL OF THE CONTROL		- Commenter of the last	Memerican P
SIGNATUR	-		Control of the last	
DATE	2	2	1995	

(Do Not Write in This Space)
CODE:

## HEADQUARTERS FOREIGN TECHNOLOGY DIVISION

AIR FORCE SYSTEMS COMMAND
UNITED STATES AIR FORCE
WRIGHT-PATTERSON AIR FORCE BASE, OHIO



TD-E/Col Wynn
UFO Sighting

2 November 1962

Dear Mr.

Your initial letter did not contain sufficient information for evaluation of your UFO sighting. Please complete and return to us the enclosed form in the self-addressed envelope provided.

Sincerely,

EDWARD H. WYNN Colonel, USAF Deputy for Science and Components

1 Atch AF Form 164

## 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.

Bay Month Year	(Circle One): A.M. or P.M.
3. Time 7	(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?	
Nearest Postal Address City or To	wn State or Country
5. How long was object in sight?  Hours  5.1 How was time in sight determined?	Minutes Seconds
a. Certain c. Not ve b. Fairly certain d. Just a	guess
6. What was the condition of the sky?	
DAY  a. Bright b. Cloudy	NIGHT  Bright  Cloudy
7. IF you saw the object during DAYLIGHT, where was the SUN	
b. In back of you e	. To your left . Overhead . Don't remember

8. IF you saw the object at NIGHT, w	nat did yo	u notice con	cerning the ST	ARS and MOON?	
8.1 STARS (Circle One):			OON (Circle (		
a. None			a. Bright mod	onlight	
b. A few			b. Dull moon	light	
c. Many			c. No moonli	ght.— pitch dark	
d. Don't remember			d. Don't rem	ember	
9. The object appeared:  (Circle One): a. As a light		hiny c.	Dark d.		
	3	miny c.	Dark a.	Don't remember	
10. If it appeared as a light, was it brig	hter than	the brightest	t:stars?		
11. Did the object:			(Circ	le One for each q	uestion)
a. Appear to stand still at any ti	me?		Yes	No	Don't Know
b. Suddenly speed up and rush a		time?	Yes	No	Don't Know
c. Break up into parts or explode			Yes	No	Don't Know
d. Give off smoke?			Yes		Don't Know
e. Change brightness?			Yes	No	Don't Know
f. Change shape?			Yes	No	Don't Know
g. Flash or flicker?			Yes		Don't Know
h. Disappear and reappear?			Yes	. No	Don't Know
12. Did the object move behind somethi	ng at any	time, particu			
(Circle One): Yes  it moved behind:	No	Don't Know			ES, then tell what
13. Did the object move in front of some	thing at a	any time, par	ticularly a clo	ud?	
(Circle One): Yes in front of:	No	Don't Know			ES, then tell what
14. Did the object appear: (Circle O	ne):	a. Solid	b. Transpare	nt c. Vapor	d. Don't Know
15. Did you observe the object through	any of the	following?			
a. Eyeglasses Yes	No		Binoculars	Yes	No
a. Eyeglasses Yes b. Sun glasses Yes	No No	Canal		Yes	No No
	****	f.	Binoculars Telescope Theodolite	Yes	No No

	a. Sound b. Color	
17.	Draw a picture that will show the shape of the object or of the object that you saw such as wings, protrusions, e. Place an arrow beside the drawing to show the direction	tc., and especially exhaust trails or vapor trails.
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 to Draw a picture of how they were arranged, and put an ar	

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?
- 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?

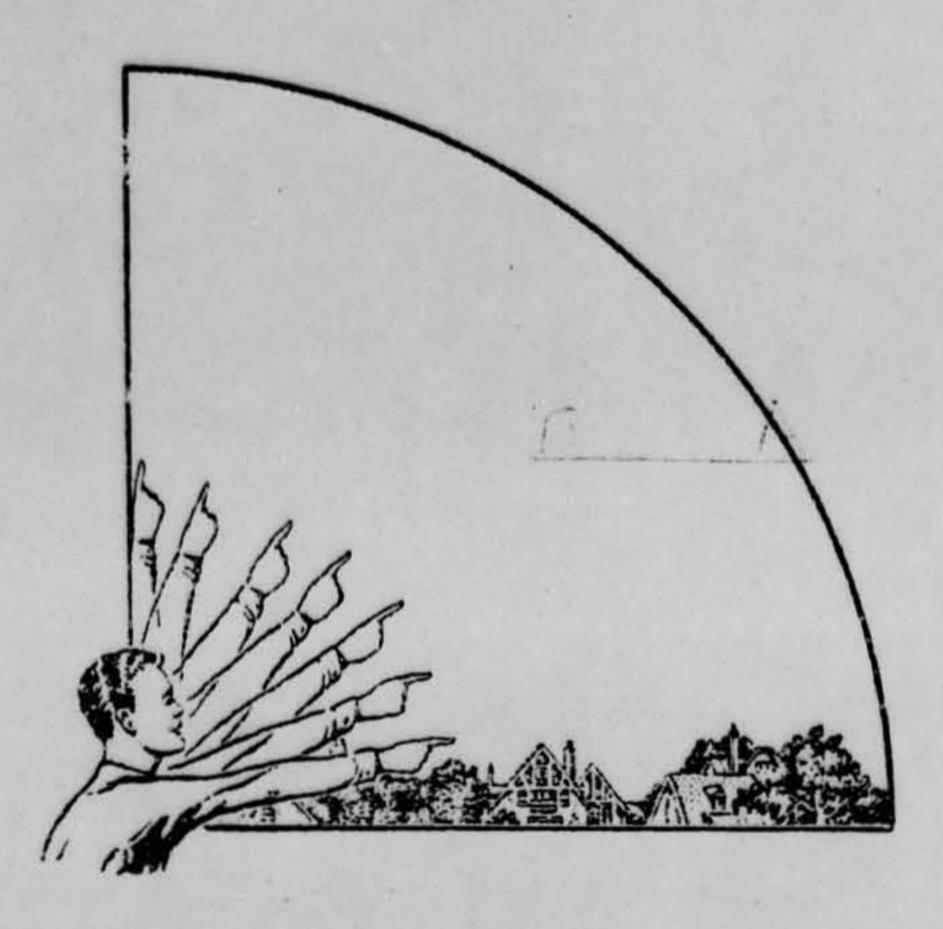
23. Did the object disappear while you were watching it? If so, how?

Lough the many the second

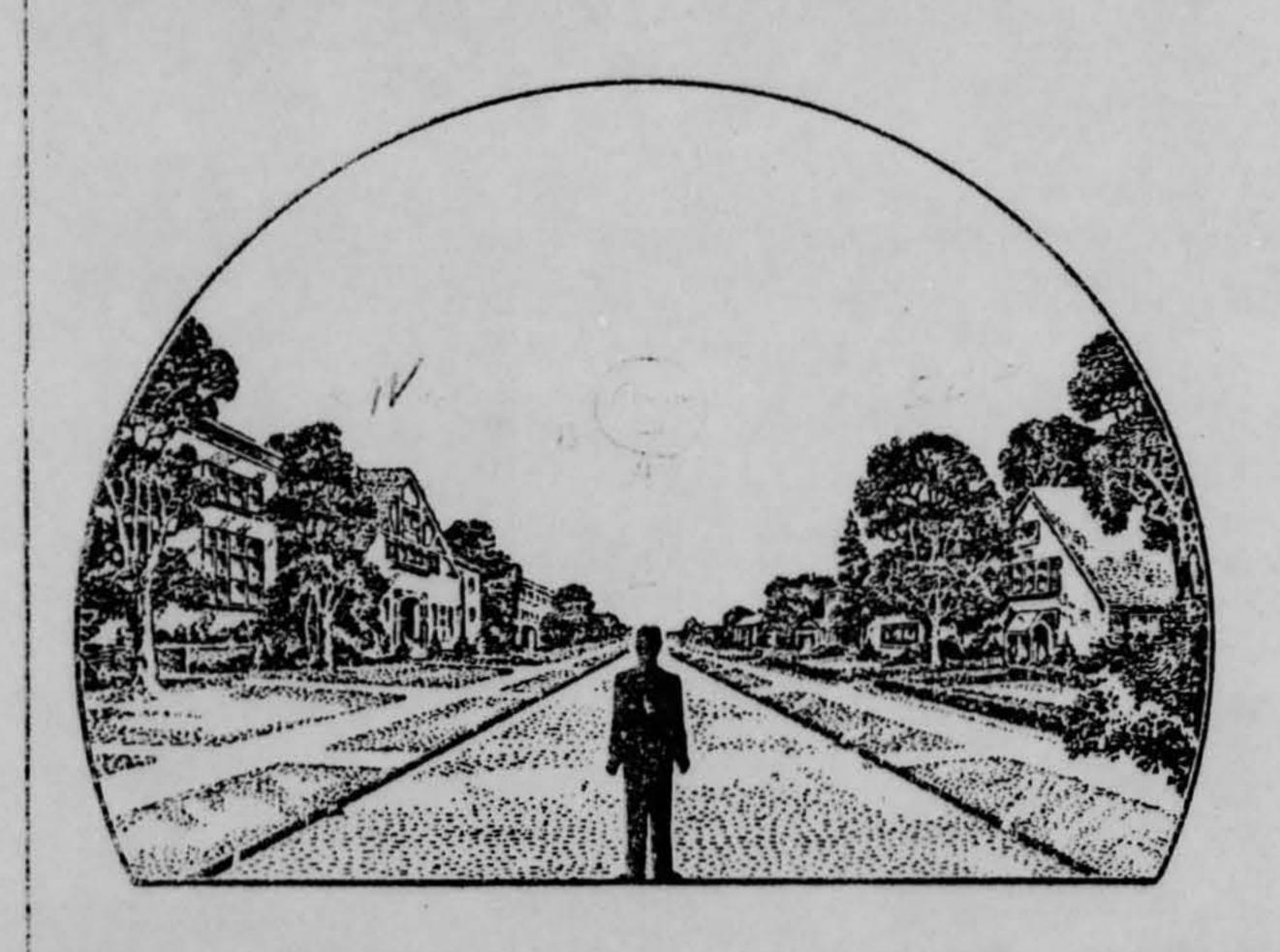
24. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

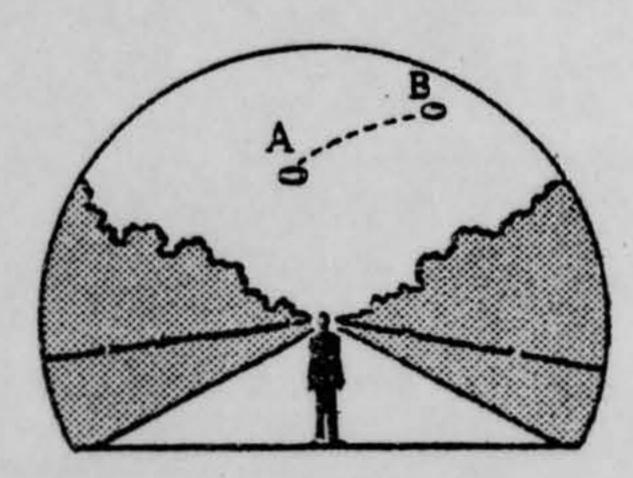
25	25. Where were you located when you saw the object? (Circle One):  a. Inside a building	26. Were you (Circle One)  a. In the business section of a city? b. In the residential section of a city?
	b. In a car	c. In open countryside?
	c. Outdoors	d. Near an airfield?
	d. In an airplane (type)	e. Flying over a city?
	e. At sea	f. Flying over open country?
	f. Other	g. Other
27	27. What were you doing at the time you saw the objec	t, and how did you happen to notice it?
	· Huan com	the moon
	the a small	30 renner del armo
,		
	Charles Sales II State	in the fact that
25	28 JE vou were MOVING IN AN AUTOMOBILE	
20		er vehicle at the time, then complete the following questions:
	28.1 What direction were you moving? (Circle O	ne)
	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 lo	oking at the object?
	(Circle One) Yes No	
	( Circle One)	
29	29. What direction were you looking when you first sav	
		g. West
	a. North	e. South h. Northwest
	b. Northeast d. Southeast	f. Southwest i. Overhead
3(	30. What direction were you looking when you last saw	who objects (Cirola One)
	or miles amounted was a you rooking when you last saw	g. West
"	a. North c. East	e. South h. Northwest
	b. Northeast d. Southeast	f. Southwest i. Overhead
3		degrees it was upward from the horizon (elevation).
	a. From true Northdegrees	
	b. From horizon degrees.	
	31.2 When it disappeared:	
	a. From true North degrees	
	b. From horizondegrees.	

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.





a. Clear sky b. Hazy c. Scattered clouds d. Thick or heavy clouds  When and to whom did you report that you had seen the object?  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:  Was this the first time that you had seen an object or objects like this?  (Circle One)  Yes  No				
b. Hazy c. Scattered clouds d. Thick or heavy clouds c. Moderate or heavy rain d. Snow e. Don't remember  When and to whom did you report that you had seen the object?  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:  Was this the first time that you had seen an object or objects like this?  (Circle One) Yes No	CLOUDS (Circle On	(e)	WEATHER (Circle One)	
c. Scattered clouds d. Thick or heavy clouds d. Snow e. Don't remember  When and to whom did you report that you had seen the object?  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:  Was this the first time that you had seen an object or objects like this?  (Circle One) Yes No	The same beautiful to		a. Dry	
d. Snow  e. Don't remember  When and to whom did you report that you had seen the object?  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:  Was this the first time that you had seen an object or objects like this?  (Circle One) Yes No			(4) (224) 174 (177)	
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(Circle One) Yes No				
	(Circle One)	Yes No		
	(Circle One) 36.2 Please list the Was this the first tir (Circle One)	Yes No eir names and addresses me that you had seen an Yes No	object or objects like this?	
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	(Circle One)  36.2 Please list the  Was this the first tir  (Circle One)  37.1 IF you answer	Yes No me that you had seen an Yes No ed NO, then when, where	object or objects like this?	