

PROJECT 10073 RECORD CARD

1. DATE 20 Oct 59		2. LOCATION Dayton, Ohio		12. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon <input type="checkbox"/> Was Aircraft <input checked="" 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 1935 GMT 21/0035Z		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			
5. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		6. SOURCE Civilian			
7. LENGTH OF OBSERVATION 1/2 min		8. NUMBER OF OBJECTS two			
9. COURSE 1. S to N 2. SSE					
10. BRIEF SUMMARY OF SIGHTING One red light, first observed in the ENE & disappeared at horizon in NNE. Either the same, or another, light reappeared at horizon in NNE & disappeared 20° above Eastern horizon.				11. COMMENTS Probably one or more a/c.	

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?

20 OCT '59
Day Month Year

2. Time of day:

7 35
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?

[REDACTED] DAYTON OHIO
Nearest Postal Address City or Town State or Country

Additional remarks: RESIDENCE PARK AREA -

5. Estimate how long you saw the object.

Hours

3 1/2 MINUTE EXH TIME
Minutes Seconds

5.1 Circle one of the following to indicate how certain you are of your answer to Question 5.

a. Certain

b. Fairly certain

c. Not very sure

d. Just a guess

6. What was the condition of the sky?

(Circle One): a. Bright daylight
b. Dull daylight
c. Bright twilight

d. Just a trace of daylight
e. No trace of daylight
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
b. In back of you
c. To your right

d. To your left
e. Overhead
f. Don't remember

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 DISCOVER SATELLITE

11. Did the object:

(Circle One for each question)

- | | | | |
|---|-----|-----------|------------|
| a. Appear to stand still at any time? | Yes | <u>No</u> | Don't Know |
| b. Suddenly speed up and rush away at any time? | Yes | <u>No</u> | Don't Know |
| c. Break up into parts or explode? | Yes | <u>No</u> | Don't Know |
| d. Give off smoke? | Yes | <u>No</u> | Don't Know |
| e. Change brightness? | Yes | <u>No</u> | Don't Know |
| f. Change shape? | Yes | <u>No</u> | Don't Know |
| g. Flicker, throb, or pulsate? | Yes | <u>No</u> | 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, then tell what

it moved in front of: _____

14. Did the object appear: (Circle One):

a. Solid?

POINT OF LIGHT,

b. Transparent?

c. Don't Know.

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

- | | | | | | |
|-----------------|------------|----|----------------|-----|----|
| a. Eyeglasses | <u>Yes</u> | 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 _____ | | |

TOOK GLASSES OFF FOR OTHER VIEWS.

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

a. Sound NONE

b. Color RED. (AUTO TAIL LIGHT)

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.

POINT OF LIGHT -
NORTH
↑
○

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.

OBJECT WENT OVER HORIZON AND
THEN CAME BACK — POSSIBLY
TWO OBJECTS OR SAME OBJECT.
NEVER SAW TWO AT ONCE.

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.



SOUTH to NORTH
IN EASTERN SKY -

21. IF POSSIBLE, try to guess or estimate what the real size of the object was in its longest dimension.
_____ feet. NO IDEA _____

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

b. Pea

c. Dime

d. Nickel

e. Quarter

f. Half dollar

g. Silver dollar

h. Baseball

i. Grapefruit

j. Basketball

k. Other _____

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

a. Certain

b. Fairly certain

c. Not very sure

d. Uncertain

23. How did the object or objects disappear from view? FIRST DISAPPEARED OVER
N.E. HORIZON — SECOND TIME FADED
INTO CITY LIGHT. E.

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.

LIGHT SOURCE AT GREAT DISTANCE

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 _____

GOT OUT OF CAR.

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?

PARKED CAR WAITING ON MOTHER

AND LOOKED AT STARS. - N.E.

APPROX 50°-60°.

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

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

- | | | | |
|--------------|--|--------------|--------------|
| a. North | <input checked="" type="radio"/> c. East | e. South | g. West |
| b. Northeast | d. Southeast | 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 70° degrees.
- b. From horizon 60° degrees.

31.2 When it disappeared:

- a. From true North 20° degrees.
- b. From horizon 20° degrees.

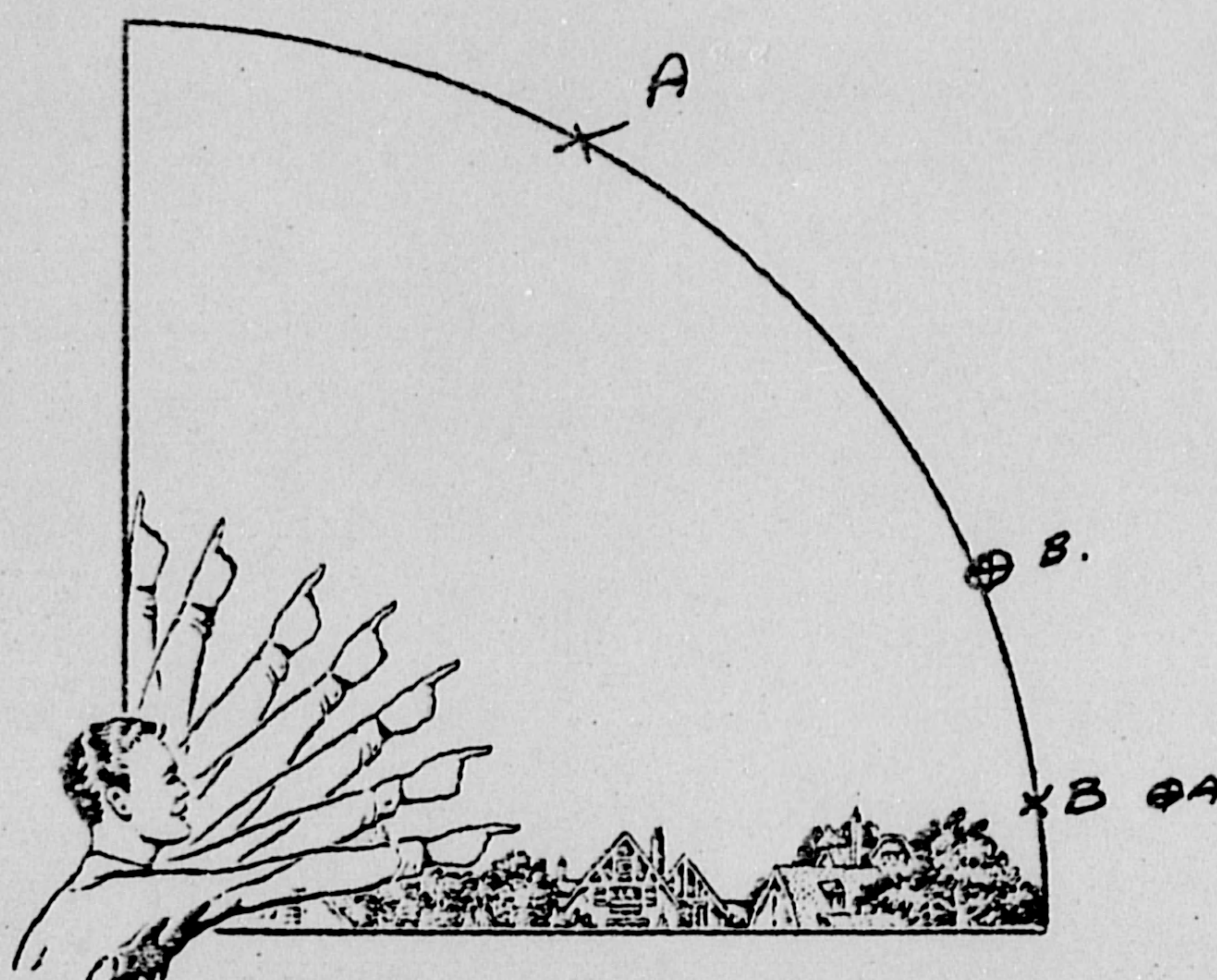
AT HORIZON.

1st 2nd
20°
HORIZON.

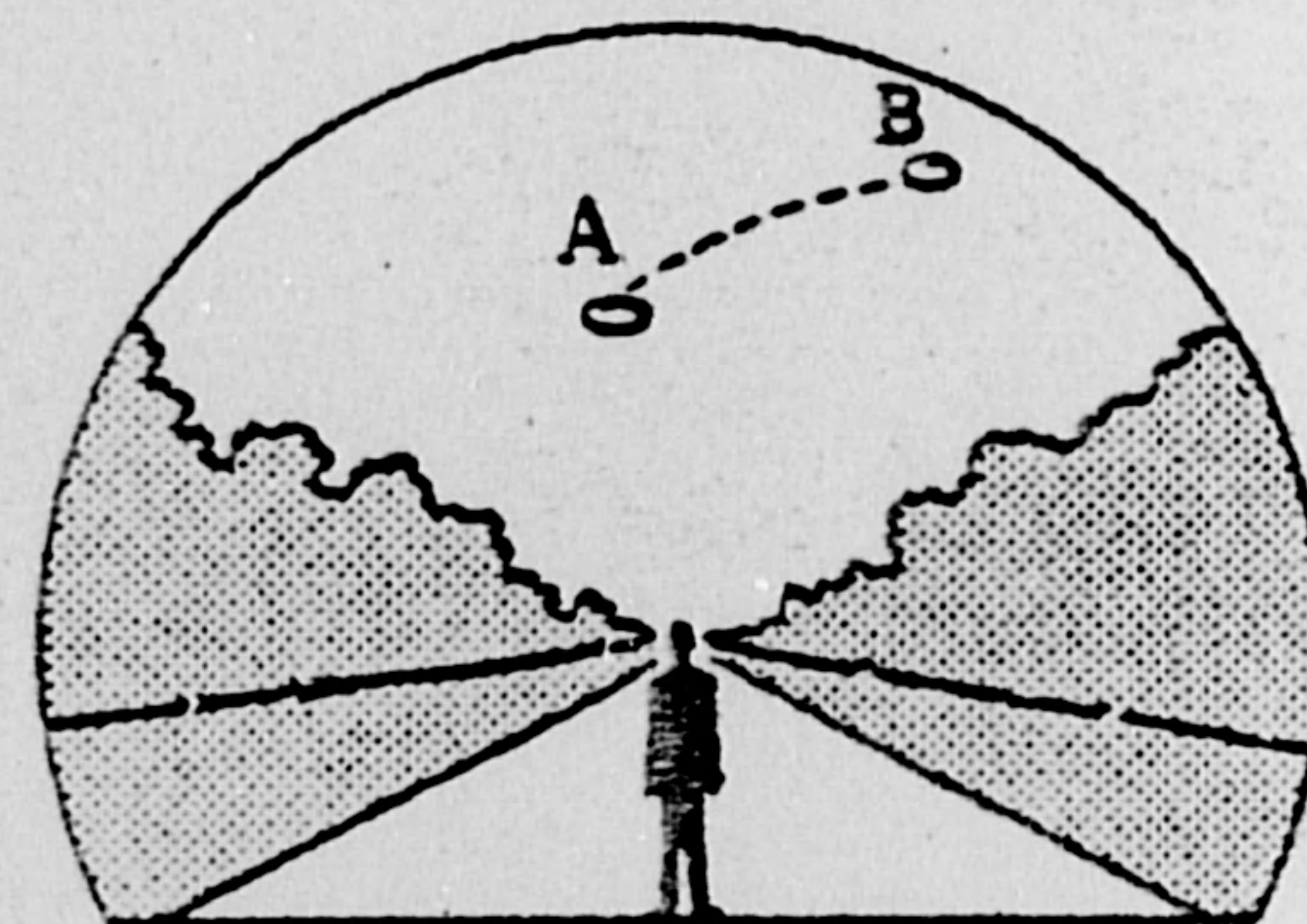
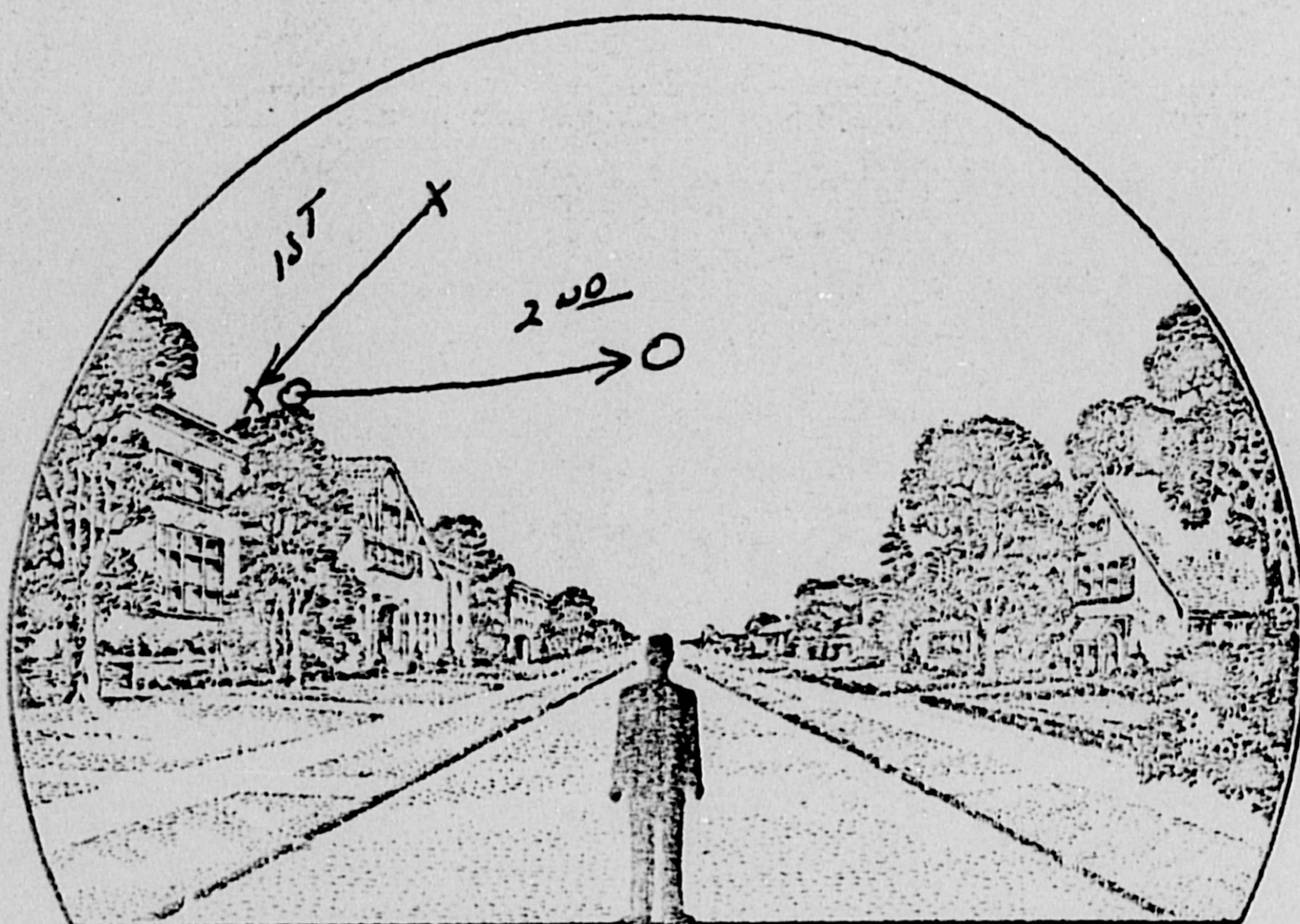
90°
20°

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.

X 1ST OBJECT
 ⊕ 2ND OBJECT



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.



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

(Circle One) Yes No

50° / HALF MINUTE..

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

MORE THAN 5 MILES

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?

STUDENT

(HIGH SCHOOL)

Age

16

Sex

MALE

Please indicate any special educational training that you have had.

a. Grade school

e. e. Technical school

b. High school

JUNIOR (PRESENT)

(Type)

c. College

f. Other special training

d. Post graduate

42. Date you completed this questionnaire:

21

Day

CCF

Month

58

Year

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?

21 OCT 59
Day Month Year

(CALLED DUTY
 OFFICER A.T.I.C.
 7:45 PM. 20 OCT 54.

36. Was anyone else with you at the time you saw the object?

(Circle One) Yes

No

SECOND OBJECT.

36.1 IF you answered YES, did they see the object too?

(Circle One) (Yes)

No

36.2 Please list their names and addresses:

their names and addresses:

[REDACTED]

[REDACTED]

DAYTON.. 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?

TOO FAST FOR A BALLOON. -
OTHER DON'T KNOW.

PROJECT 10073 RECORD CARD

1. DATE 20 Oct 59		2. LOCATION Dayton, 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 checked="" 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 2130 GMT 21/0230Z		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			
5. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		6. SOURCE Civilian			
7. LENGTH OF OBSERVATION 15 mins		8. NUMBER OF OBJECTS two		9. COURSE 1. S to N & back 2. SE to NW & back	
10. BRIEF SUMMARY OF SIGHTING A yellowish or blue-white light w/bright, white glow came fm SE horizon, passed overhead, circled & went back over SE horizon. Less than a min later, either the same, or another, light came fm SE passed a little North of observer's position, turned & went back to the SE.				11. COMMENTS Probably a/c.	

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?

20 OCT 59
Day Month Year

2. Time of day: 2130

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?

[REDACTED] Dayton (North) Ohio
Nearest Postal Address City or Town State or Country

Additional remarks: _____

5. Estimate how long you saw the object.

5-10
Hours Minutes Seconds

5.1 Circle one of the following to indicate how certain you are of your answer to Question 5.

a. Certain

b. Fairly certain

c. Not very sure

d. Just a guess

6. What was the condition of the sky?

(Circle One): a. Bright daylight
b. Dull daylight
c. Bright twilight

d. Just a trace of daylight
e. No trace of daylight
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
b. In back of you
c. To your right

d. To your left
e. Overhead
f. Don't remember

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? | 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? | 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? | Yes | <input checked="" type="radio"/> No | Don't Know |
| f. Change shape? | Yes | <input checked="" type="radio"/> No | Don't Know |
| g. Flicker, throb, or pulsate? | Yes | <input checked="" type="radio"/> 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, then 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 | <input checked="" type="radio"/> No | e. Binoculars | Yes | <input checked="" type="radio"/> No |
| b. Sun glasses | Yes | <input checked="" type="radio"/> No | f. Telescope | Yes | <input checked="" type="radio"/> No |
| c. Windshield | Yes | <input checked="" type="radio"/> No | g. Theodolite | Yes | <input checked="" type="radio"/> No |
| d. Window glass | Yes | <input checked="" type="radio"/> No | h. Other _____ | | |

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

a. Sound

No

b. Color

YELLOWISH OR BLUE WHITE

*bright
(white glow)*

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.

Came from SE horizon, passed overhead, when approx 45° above NW horizon it circled and went back over SE horizon. Less than a minute later, either the same ~~one~~, or ~~a~~ different, light came from the SE, passed a little north of obs. position, turned and went back to the SE.

*(the above was given by
Mr Hall.)*

18. The edges of the object were:

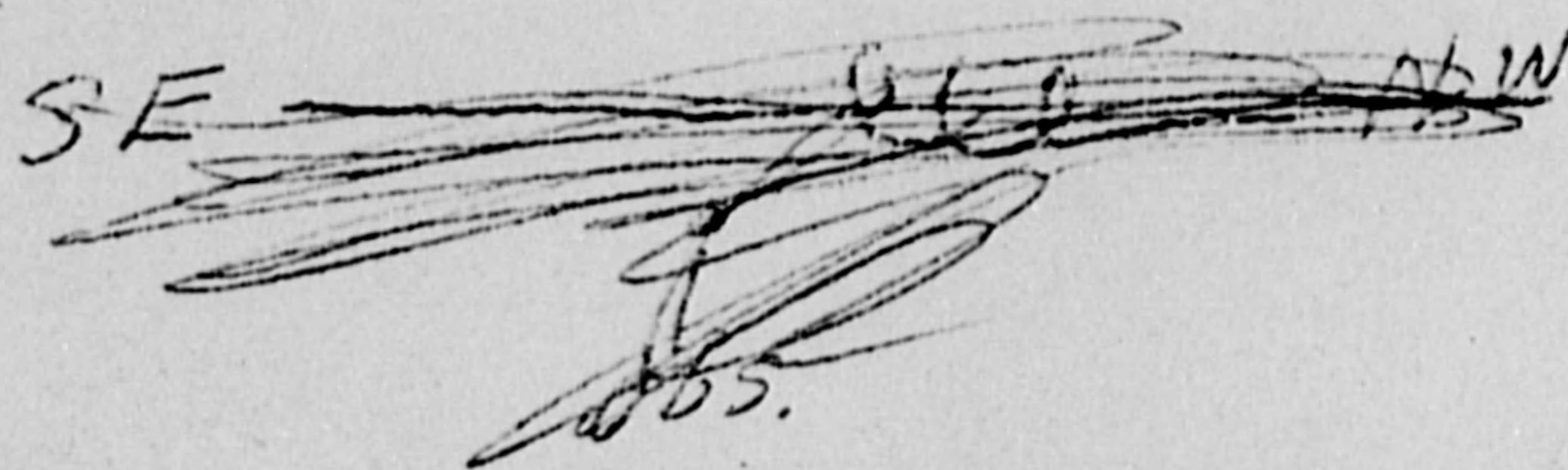
- (Circle One):
- a. Fuzzy or blurred
 - b. Like a bright star
 - ☒ c. Sharply outlined
 - d. Don't remember

e. Other

19. IF there was MORE THAN ONE object, then how many were there? 2
Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

SHAPED LIKE V

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
b. Pea
c. Dime
d. Nickel
e. Quarter
f. Half dollar

- g. Silver dollar
h. Baseball
i. Grapefruit
j. Basketball
k. Other _____

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

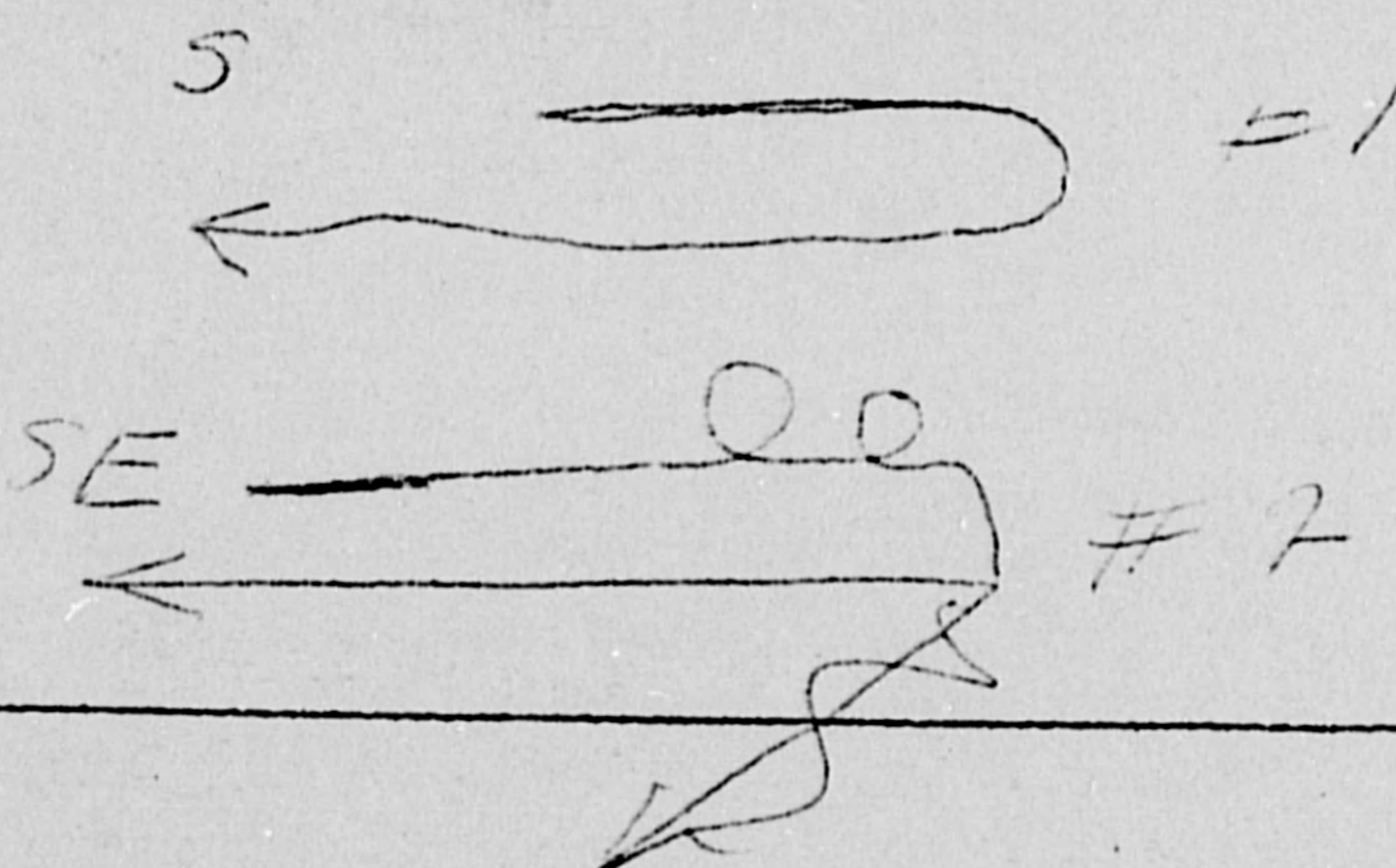
- a. Certain
b. Fairly certain

- c. Not very sure
d. Uncertain

23. How did the object or objects disappear from view? TO DISTANT HORIZON
FADED OUT DUE TO DISTANCE.

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.

#1 S. To N. overhead



(AS GIVEN by
MR. WOLF)

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 STANDING IN OPEN AREA

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?

MOVING LIGHT IN COMPARISON TO STARS

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 | <input checked="" type="radio"/> e. South #1 | g. West |
| b. Northeast | <input checked="" type="radio"/> d. Southeast #2 | f. Southwest | h. Northwest |

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

- | | | | |
|--------------|---|--|--------------|
| a. North | c. East #2 | <input checked="" type="radio"/> e. South #1 | g. West |
| b. Northeast | <input checked="" type="radio"/> d. Southeast | 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 180 degrees.
- b. From horizon 45° + degrees.

31.2 When it disappeared:

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

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:

[REDACTED] " " " " [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?

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

HIGH SPEED AIRCRAFT

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?

APPROX. EXCEEDS 500 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?

APPROX. SAME AS B-47
B-52 _____ feet.

41. Please give the following information about yourself:

NAME

[REDACTED]

First Name

[REDACTED]

Middle Name

[REDACTED]

ADDRESS

[REDACTED]

Street

DAYTON

City

7

Zone

OHIO

State

TELEPHONE NUMB

[REDACTED]

What is your present job?

DAYTON Power & Light

Age 20

Sex M

Please indicate any special educational training that you have had.

a. Grade school YES

b. High school YES

c. College No

d. Post graduate No

e. e. Technical school _____

(Type) _____

f. Other special training ELECTRONICS

42. Date you completed this questionnaire:

Day

Month

Year