

**PROJECT 10073 RECORD CARD**

1. DATE Jul 62	2. LOCATION Ashland, Wisconsin	12. CONCLUSIONS	
3. DATE-TIME GROUP Local _____ GMT 0500Z	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 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	
5. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6. SOURCE Civilian	11. COMMENTS	
7. LENGTH OF OBSERVATION 12 SECS	8. NUMBER OF OBJECTS one	9. COURSE maneuvered	Brief duration of flashing lights. Probability exists that this was an a/c sighting & there is no indication that the obj possessed characteristics inconsistent w/ this analysis.
10. BRIEF SUMMARY OF SIGHTING Bright obj flashing observed through window fm bedroom. Obsvd as five flashes only. No color, just as a b bright star.			

ATIC FORM 329 (REV 26 SEP 52)

DEPARTMENT OF THE AIR FORCE  
WASHINGTON

OFFICE OF THE SECRETARY

July 23, 1962

Dear [REDACTED]:

The Office of the President has asked the Air Force to reply to your recent letter concerning an unidentified aerial sighting from your bedroom window.

Please complete the attached form, in duplicate, and mail them back to me. If your report is detailed the Air Force will have an analysis to you shortly.

For your information I have inclosed the latest Department of Defense Fact Sheet which explains the Air Force's position relative to unidentified flying objects.

Sincerely,

2 Attachments

1. FTD Form 164
2. DOD Fact Sheet

WILLIAM J. LOCKADOO  
Lt. Colonel, USAF  
Public Information Division  
Office of Information

[REDACTED]  
[REDACTED]  
Ashland, Wisc.

## 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?

10 pm 11 1962  
Day Month Year

2. Time of day: \_\_\_\_\_ 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?

Nearest Postal Address

City or Town

State or Country

Additional remarks: \_\_\_\_\_

5. How long was object in sight?

Hours

Minutes

Seconds

5.1 How was time in sight determined?

a. Certain  
 b. Fairly certain

c. Not very sure  
 d. Just a guess

6. What was the condition of the sky?

DAY

a. Bright  
 b. Cloudy

NIGHT

a. Bright  
 b. Cloudy

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  
 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, 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?

## 11. Did the object:

(Circle One for each question)

a. Appear to stand still at any time?	Yes	No	Don't Know
b. Suddenly speed up and rush away at any time?	Yes	No	Don't Know
c. Break up into parts or explode?	Yes	No	Don't Know
d. Give off smoke?	Yes	No	Don't Know
e. Change brightness?	Yes	No	Don't Know
f. Change shape?	Yes	No	Don't Know
g. Flash or flicker?	Yes	No	Don't Know
h. Disappear and reappear?	Yes	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 it moved 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	a. 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 \_\_\_\_\_

b. Color \_\_\_\_\_

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?

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? \_\_\_\_\_ 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).

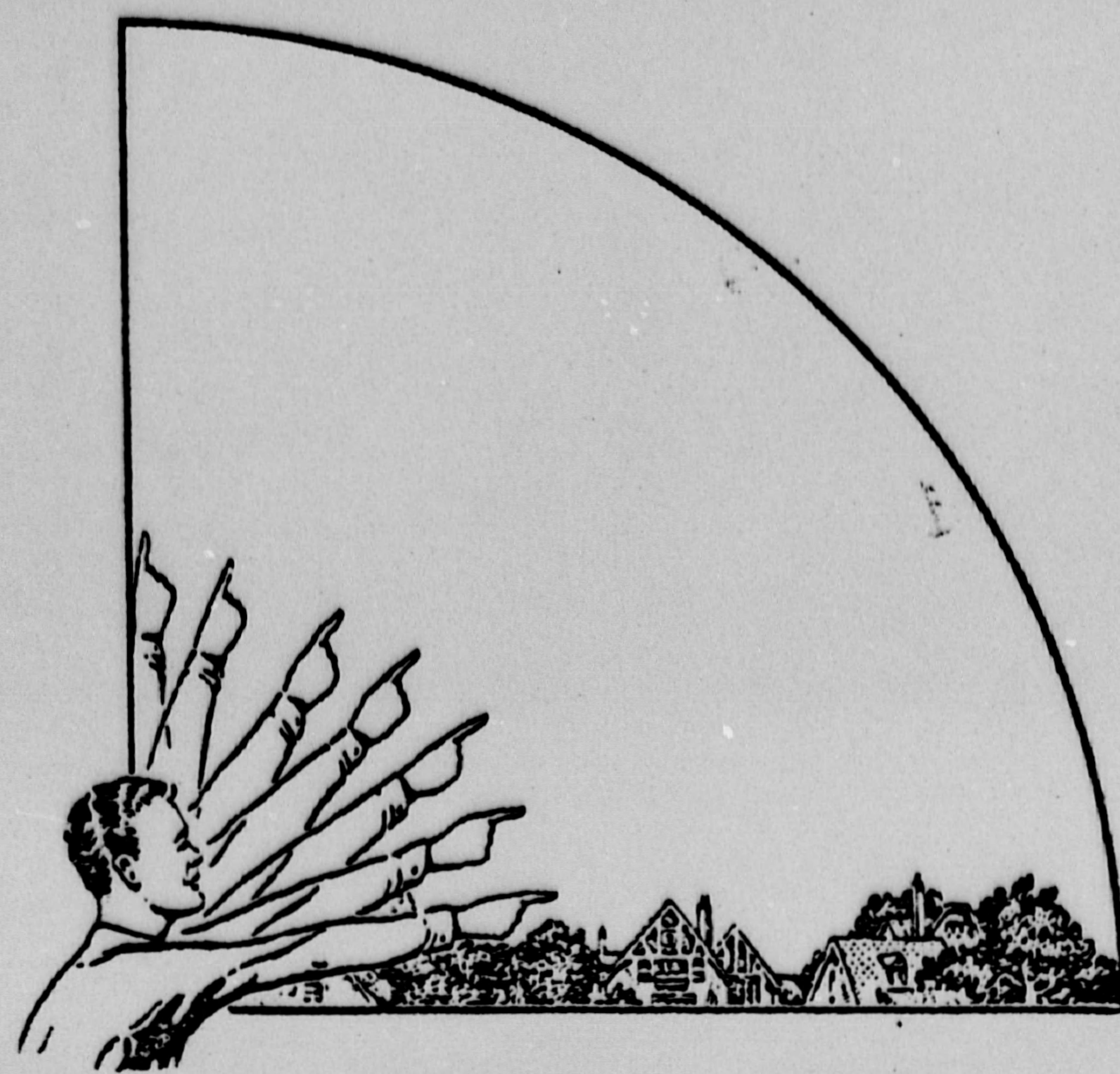
31.1 When it first appeared:

- a. From true North \_\_\_\_\_ degrees.
- b. From horizon \_\_\_\_\_ degrees.

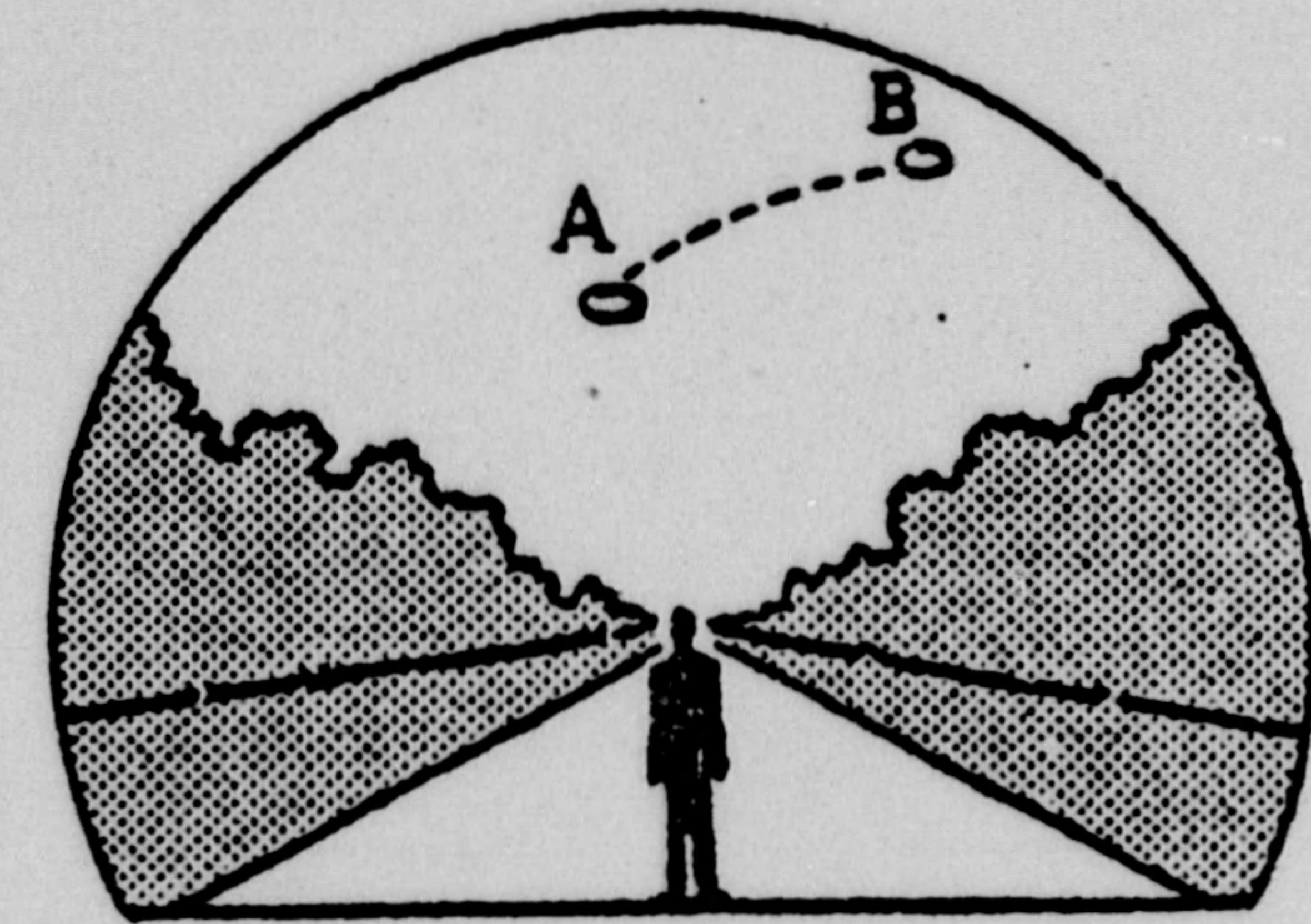
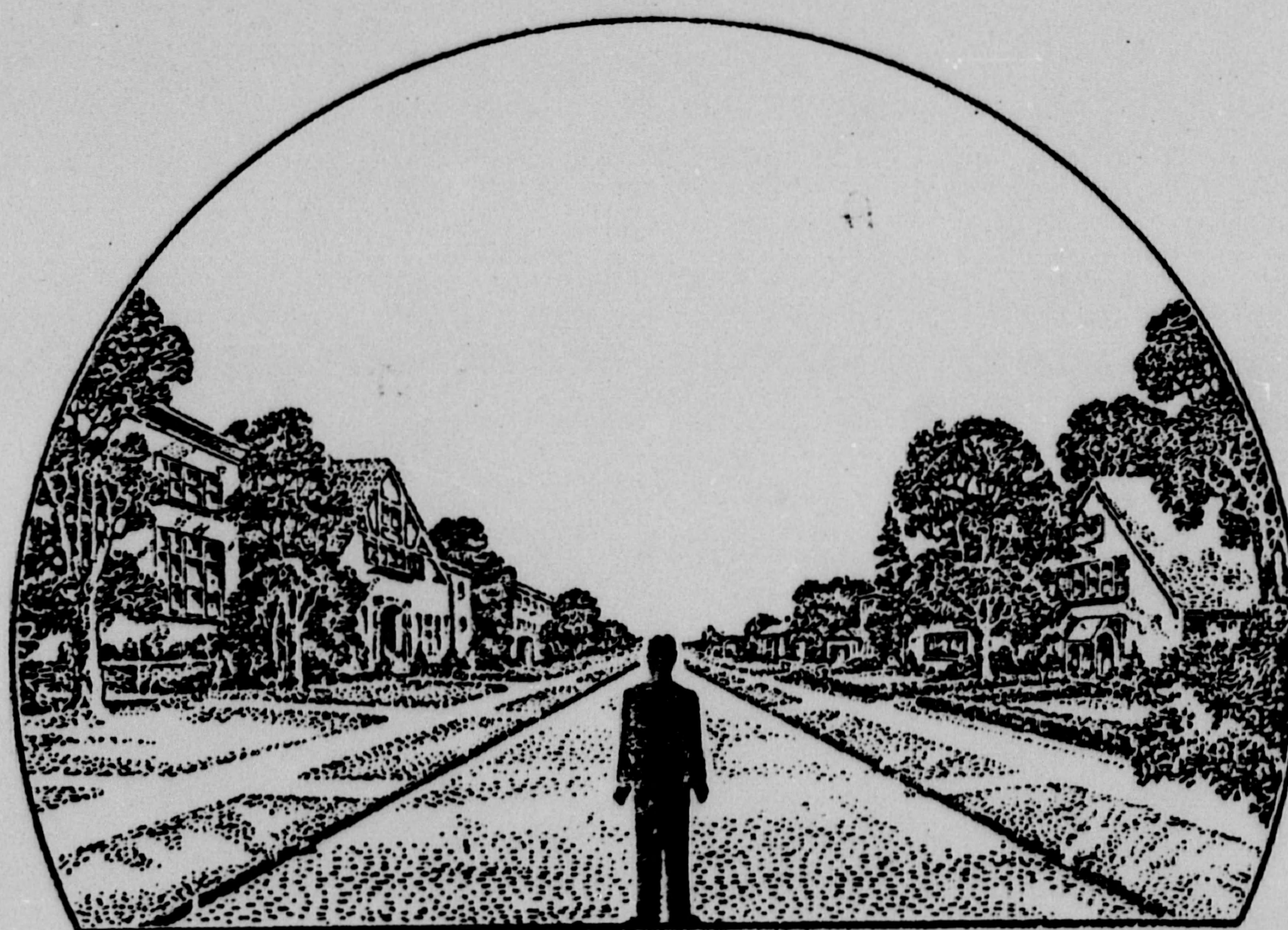
31.2 When it disappeared:

- a. From true North \_\_\_\_\_ degrees.
- b. From horizon \_\_\_\_\_ degrees.

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?

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?

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

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? \_\_\_\_\_

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 \_\_\_\_\_ City \_\_\_\_\_ Zone \_\_\_\_\_ State \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

Age \_\_\_\_\_ Sex \_\_\_\_\_

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

42. Date you completed this questionnaire:

Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

**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 information that you have already given in the questionnaire, and add any further comments, statements, or 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.

NAME \_\_\_\_\_  
(Please Print) \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**(Do Not Write in This Space)**  
CODE: