PROJECT 10073 RECORD CARD

1. DATE

14 May 64

2. LOCATION

Dayton, Ohio

3. DATE-TIME GROUP

Local _____

GMT 15/0300Z

4. TYPE OF OBSERVATION

☒ Ground-Visual ☐ Ground-Radar

☐ Air-Visual ☐ Air-Intercept Radar

5. PHOTOS

☐ Yes

☒ No

6. SOURCE

civilian

7. LENGTH OF OBSERVATION

20 minutes

8. NUMBER OF OBJECTS

one

9. COURSE

South (?)

12. CONCLUSIONS

- ☐ Was Balloon
- ☐ Probably Balloon
- ☐ Possibly Balloon
- ☐ Was Aircraft
- ☐ Probably Aircraft
- ☐ Possibly Aircraft
- ☒ Was Astronomical Venus
- ☐ Probably Astronomical
- ☐ Possibly Astronomical
- ☐ Other _____
- ☐ Insufficient Data for Evaluation
- ☐ Unknown

10. BRIEF SUMMARY OF SIGHTING

Bright obj as bright as an a/c landing light disappearing below horizon, white light. Bright moving star. Changed brightness with distance, stood still, flashed and flickered. In South.

11. COMMENTS

Spica in South at 35 deg elevation. Venus in West setting at time of sighting. No object (Astro would set in S. Likely error in direction and VENUS was obj observed. Case considered to be a possible Venus observation.

ATIC FORM 329 (REV 26 SEP 52)

14 May 64
Dayton, Ohio VEWUS

U.S. AIR FORCE TECHNICAL INFORMATION

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. 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?

14	MAY	64
Day	Month	Year

2. Time of day: 1000 (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?

E DAYTON		OHIO
Nearest Postal Address	City or Town	State or County

5. How long was object in sight? (Total Duration)

0	20	—
Hours	Minutes	Seconds

a. Certain
(b. Fairly certain)
c. Not very sure
d. Just a guess

5.1 How was time in sight determined? estimate

5.2 Was object in sight continuously? Yes X No ____

6. What was the condition of the sky?

DAY	NIGHT
a. Bright	(a. Bright)
b. Cloudy	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

FORM FTD OCT 62 164 This form supersedes FTD 164, Jul 61, which is obsolete.

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. 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

10. The object appeared: *(Circle One)*:

a. Solid
b. Transparent
c. Vapor
d. As a light
e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? *(Circle One)*:

a. Brighter
b. Dimmer
c. About the same
d. Don't know

11.1 Compare brightness to some common object:

A/C Landing Lights

12. 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 _____

13. 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? with distance	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

14. Did the object disappear while you were watching it? If so, how? No, dropped below horizon, going South

15. 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: _____

16. 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: _____

17. Tell in a few words the following things about the object:

a. Sound None

b. Color White light

18. 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?

Don't know

19. 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.

Round like a bright, moving star

20. 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? _____

21. 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? _____

22. 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 _____

23. 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 _____

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

N/A

24.1 What direction were you moving? (Circle One)

a. North c. East e. South g. West
b. Northeast d. Southeast f. Southwest h. Northwest

24.2 How fast were you moving? _____ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One) Yes No

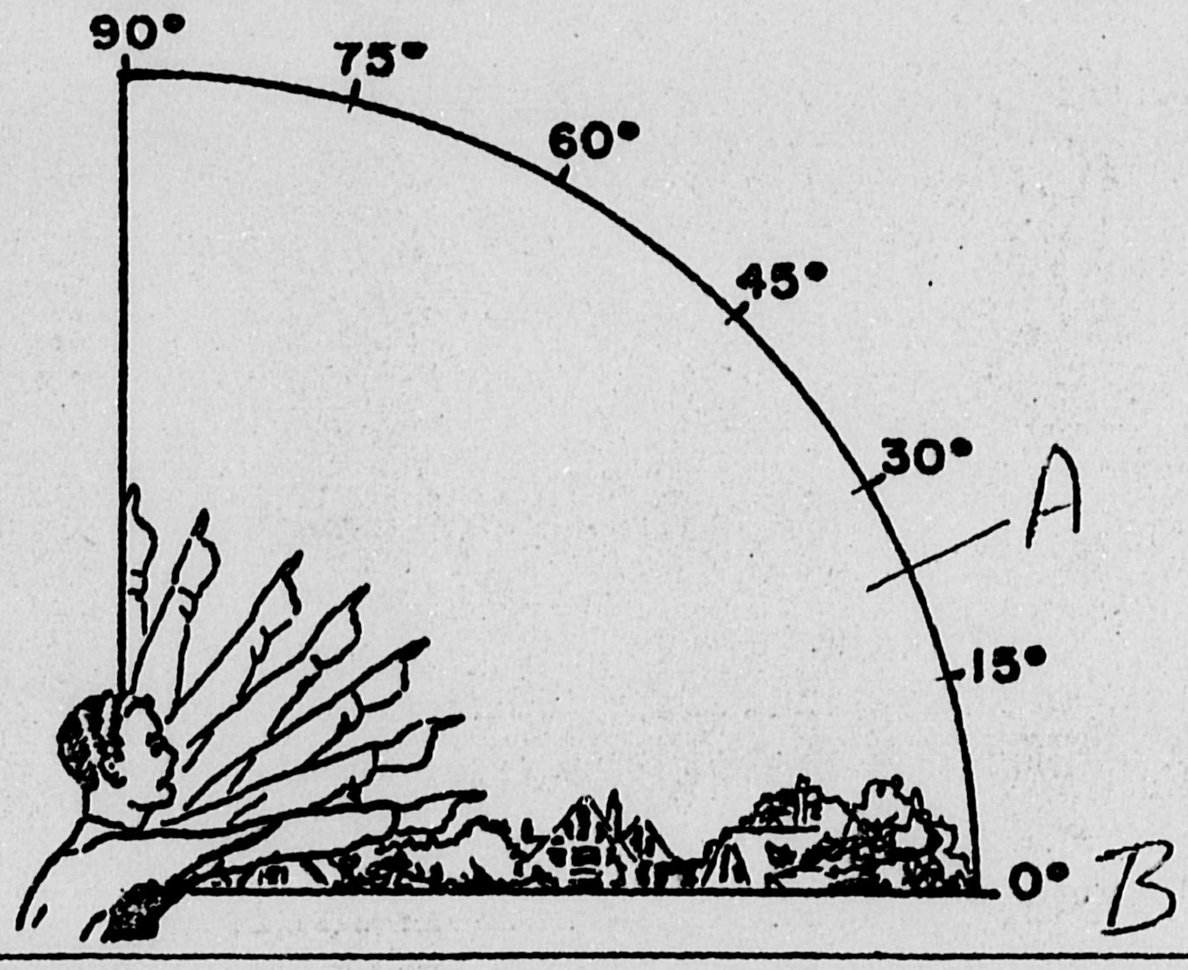
25. Did you observe the object through any of the following?

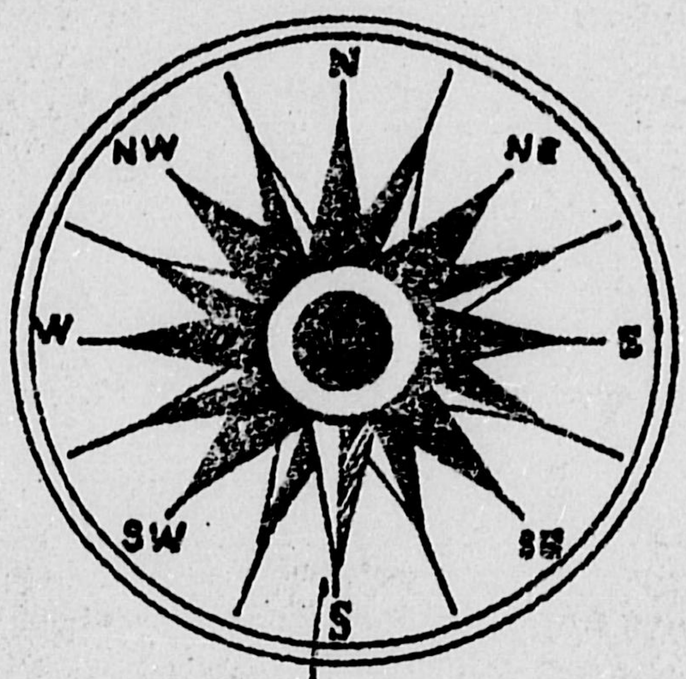
a. Eyeglasses	Yes	(No)	e. Binoculars	Yes	(No)
b. Sun glasses	Yes	(No)	f. Telescope	Yes	(No)
c. Windshield	Yes	(No)	g. Theodolite	Yes	(No)
d. Window glass	(Yes)	No	h. Other _____		

26. 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.

Flickering light

27. 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. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.





A and B

28. 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.

29. 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.

Just one

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

NO

31. Was anyone else with you at the time you saw the object? *(Circle One)* (Yes) No

31.1 IF you answered YES, did they see the object too? *(Circle One)* (Yes) No

31.2 Please list their names and addresses:

OWN Children

32. Please give the following information about yourself:

NAME [redacted] (Last Name) [redacted] (First Name) [redacted] (Middle Name)

ADDRESS [redacted] (Street) E DAYTON (City) 10 (Zone) OHIO (State)

TELEPHONE NUMBER [redacted] AGE 40 SEX F

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

33. When and to whom did you report that you had seen the object?

14 MAY 64 (Day) _____ (Month) _____ (Year) FTD D/O CAPT FAER EXT 72211

34. Date you completed this questionnaire: None Reg FTD DO

Day Month Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

None

PROJECT 10073 RECORD CARD

1. DATE 15 May 64	2. LOCATION Dayton, Ohio	12. CONCLUSIONS ☐ Was Balloon ☒ Probably Balloon ☐ Possibly Balloon ☐ Was Aircraft ☐ Probably Aircraft ☐ Possibly Aircraft ☐ Was Astronomical ☐ Probably Astronomical ☐ Possibly Astronomical ☐ Other_____ ☐ Insufficient Data for Evaluation ☐ Unknown
3. DATE-TIME GROUP Local _____ GMT 15/2200Z	4. TYPE OF OBSERVATION ☒ Ground-Visual ☐ Ground-Radar ☐ Air-Visual ☐ Air-Intercept Radar	
5. PHOTOS ☐ Yes ☒ No	6. SOURCE civilian	
7. LENGTH OF OBSERVATION 2 minute	8. NUMBER OF OBJECTS one	9. COURSE

10. BRIEF SUMMARY OF SIGHTING

Round light object with erratic motion which changed brightness and shape. Color silver and gold. No sound. Small object. Disappeared beyond trees. Witness 15 miles from Vandalai.

11. COMMENTS

Witness 13 year old youth. No data on direction of flight. Location near Sulpher Grove WX station which launches Balloons at 1600. Description confroms with Balloon observation. All other data omitted essential for evaluation, as confirmed balloon. Case evaluated as a probable balloon sighting.

ATIC FORM 329 (REV 26 SEP 52)

Pilot Project Blue Book Supplemental Data Dayton Ohio

U.S. AIR FORCE TECHNICAL INFORMATION

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. 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?

15 (Day) May (Month) 64 (Year)

2. Time of day: ~~2000~~ 1700 (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] (Nearest Postal Address) Dayton 5 (City or Town) Ohio (State or County)

5. How long was object in sight? (Total Duration) 0 (Hours) 2 (Minutes) 0 (Seconds)

a. Certain
(b.) Fairly certain
c. Not very sure
d. Just a guess

5.1 How was time in sight determined? from experience

5.2 Was object in sight continuously? Yes X No ____

6. What was the condition of the sky?

DAY	NIGHT
(a.) Bright	a. Bright
b. Cloudy	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

FTD FORM OCT 62 164 This form supersedes FTD 164, Jul 61, which is obsolete.

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. 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

10. The object appeared: *(Circle One)*:

(a.) Solid
b. Transparent
c. Vapor
d. As a light
e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? *(Circle One)*:

a. Brighter
(b.) Dimmer
c. About the same
d. Don't know

11.1 Compare brightness to some common object:

Same as looking into a flashlight

12. 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 _____

13. 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

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

No

15. 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: a tree

16. 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: _____

17. Tell in a few words the following things about the object:

a. Sound no sound

b. Color silver and gold

18. 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?

all of it

19. 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.



20. 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? _____

21. 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? _____

22. 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 _____

23. 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? 15 mi fm. Vandalia
e. Flying over a city?
f. Flying over open country?
g. Other _____

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

a. North c. East e. South g. West
b. Northeast d. Southeast f. Southwest h. Northwest

24.2 How fast were you moving? _____miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One) Yes No

25. 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 _____		

26. 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.

No, maybe a beltbuckle

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

No

31. Was anyone else with you at the time you saw the object? *(Circle One)* (Yes) No

31.1 IF you answered YES, did they see the object too? *(Circle One)* (Yes) No

31.2 Please list their names and addresses:

[redacted]

21 ??

32. Please give the following information about yourself:

NAME [redacted] (Last Name) [redacted] (First Name) Gene (Middle Name)

ADDRESS [redacted] (Street) [redacted] (City) 5 (Zone) Ohio (State)

TELEPHONE NUMBER [redacted] AGE 13 SEX M

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

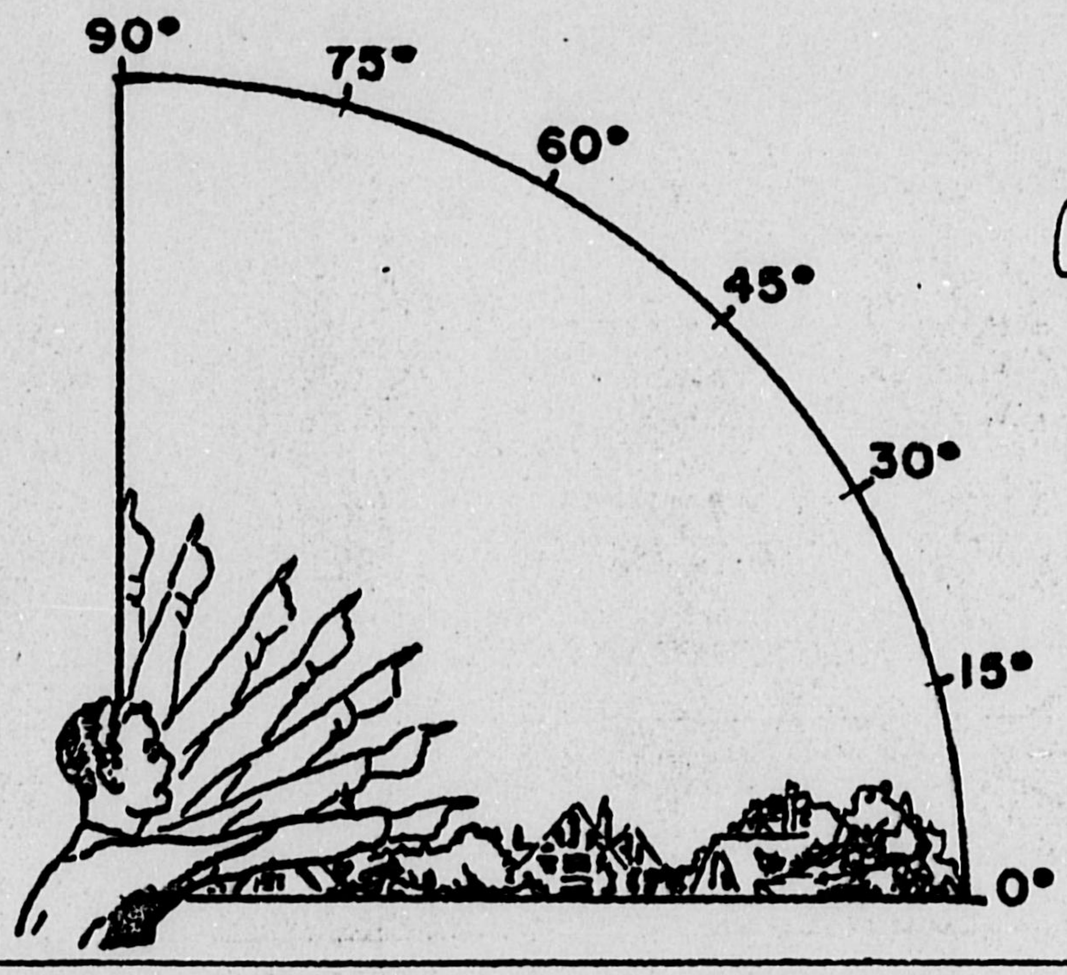
None

33. When and to whom did you report that you had seen the object?

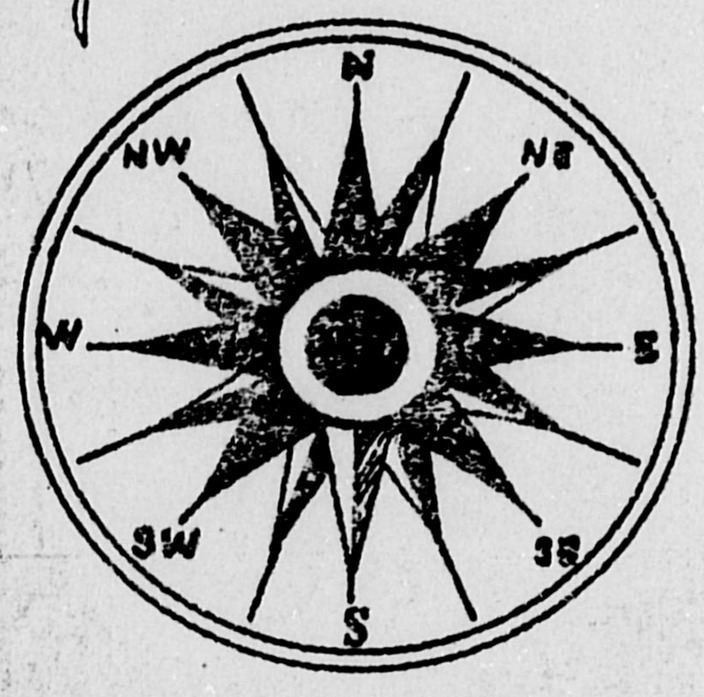
15 (Day) May (Month) 64 (Year)

Mother

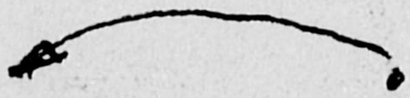
27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



can't say



28. 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.



29. IF there was MORE THAN ONE object, then how many were there? No

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

No

31. Was anyone else with you at the time you saw the object? *(Circle One)* (Yes) No

31.1 IF you answered YES, did they see the object too? *(Circle One)* (Yes) No

31.2 Please list their names and addresses:

21 [redacted]

32. Please give the following information about yourself:

NAME [redacted] [redacted] [redacted]
Last Name First Name Middle Name

ADDRESS [redacted] Dayton 5 Ohio
Street City Zone State

TELEPHONE NUMBER [redacted] AGE 13 SEX M

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

None

33. When and to whom did you report that you had seen the object?

15 May 64
Day Month Year

Mother

34. Date you completed this questionnaire: 16 (Day) May (Month) 64 (Year)

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

6 or 7 girls also saw it at his friends party.

PROJECT 10073 RECORD CARD

1. DATE	2. LOCATION	12. CONCLUSIONS
15 May 64	Dayton, Ohio	☐ Was Balloon ☐ Probably Balloon ☐ Possibly Balloon
3. DATE-TIME GROUP Local _____ GMT 16/0400Z	**4. TYPE OF OBSERVATION** ☒ Ground-Visual ☐ Ground-Radar ☐ Air-Visual ☐ Air-Intercept Radar	☐ Was Aircraft ☐ Probably Aircraft ☐ Possibly Aircraft
5. PHOTOS ☐ Yes ☒ No	**6. SOURCE** civilian	☐ Was Astronomical ☐ Probably Astronomical ☐ Possibly Astronomical
7. LENGTH OF OBSERVATION 5 - 10 minutes	**8. NUMBER OF OBJECTS** one	**9. COURSE** NE
		☒ Other ECHO I ☐ Insufficient Data for Evaluation ☐ Unknown

10. BRIEF SUMMARY OF SIGHTING

Object as bright as Venus. Flight from West to East continuous.

11. COMMENTS

ECHO I passed North of City at 64^{3} deg elevation heading NE at 1021 pm. Obj resembles Satellite observation. Time off about 30 minutes may be attributed to any number of causes. Likely observation of ECHO. Very limited information.

1 COLUMBUS, OHIO EST

AT 04.33 AM MAY.15 EAST OF CITY, 21 DEGREES ABOVE HORIZON MOVING NE
AT 04.07 AM MAY.16 EAST OF CITY, 15 DEGREES ABOVE HORIZON MOVING NE
AT 03.41 AM MAY.17 EAST OF CITY, 09 DEGREES ABOVE HORIZON MOVING NE
AT 03.15 AM MAY.18 EAST OF CITY, 05 DEGREES ABOVE HORIZON MOVING NE
AT 04.40 AM MAY.19 EAST OF CITY, 38 DEGREES ABOVE HORIZON MOVING NE

ATIC FORM 333 (REV 25 SEP 62)

ECD 1021 PM NR ctr 63°. NE → 1155 16 May
Called in fm. AFLC Command Post

U.S. AIR FORCE TECHNICAL INFORMATION

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. 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?

15 (Day) May (Month) 64 (Year)

2. Time of day: 11 (Hour) 00 (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] (Nearest Postal Address) Dayton (City or Town) Ohio (State or County)

5. How long was object in sight? (Total Duration) 0 (Hours) 5-10 (Minutes) 0 (Seconds)

a. Certain
b. Fairly certain
c. Not very sure
d. Just a guess

5.1 How was time in sight determined? _____

5.2 Was object in sight continuously? Yes _____ No _____

6. What was the condition of the sky?

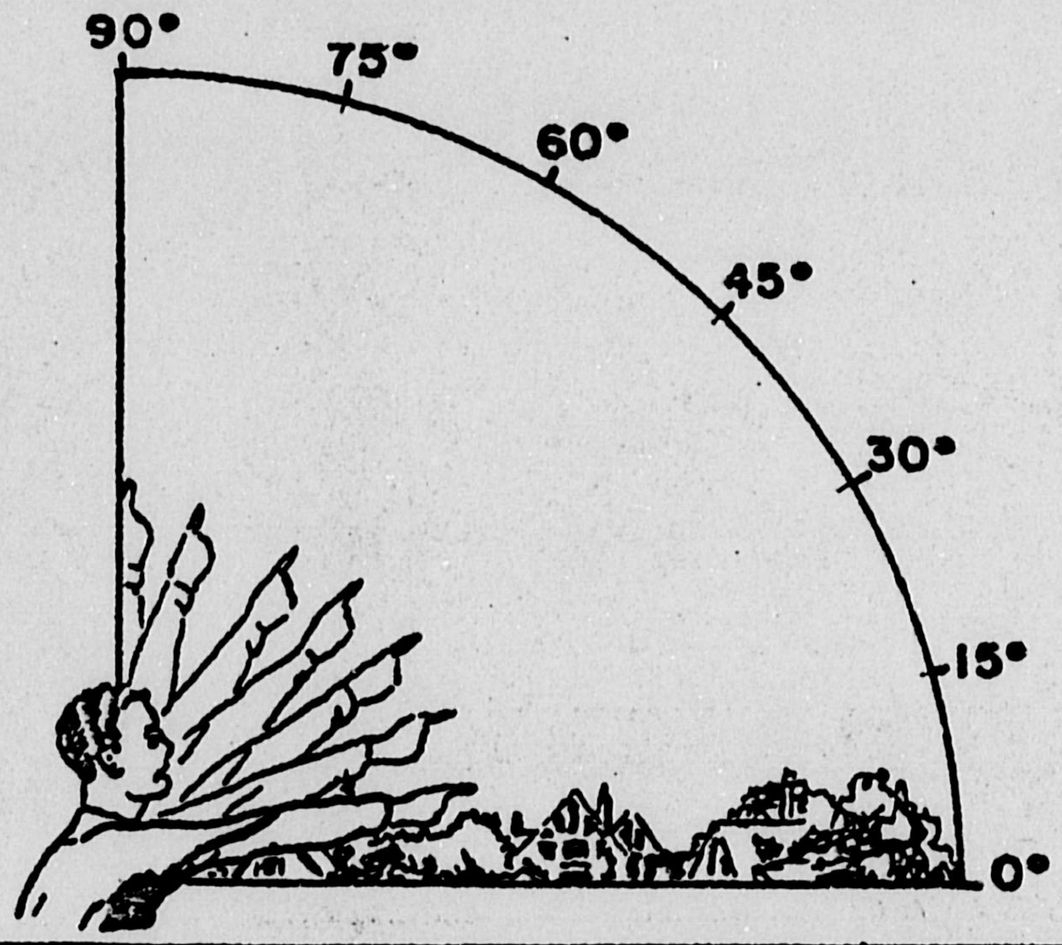
DAY	NIGHT
a. Bright	a. Bright
b. Cloudy	b. Cloudy

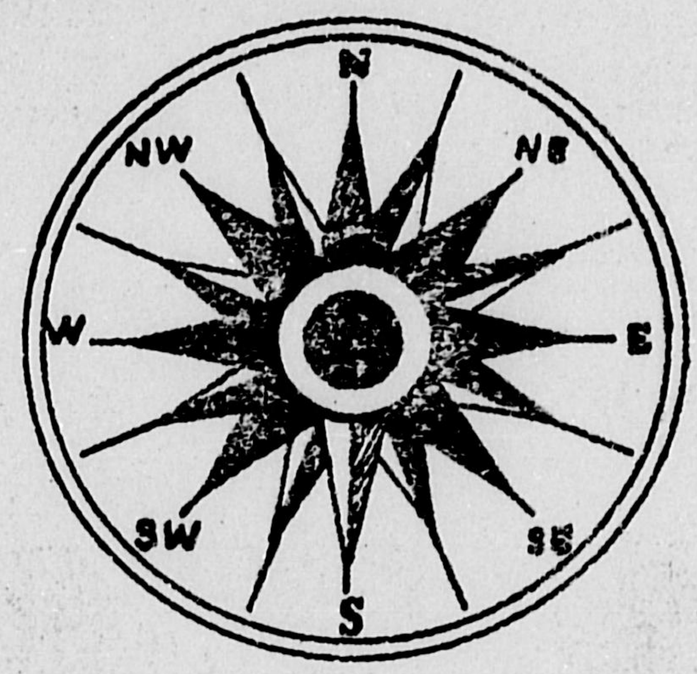
7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(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

FORM FTD OCT 62 164 This form supersedes FTD 164, Jul 61, which is obsolete.

27. 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. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.





28. 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.

29. 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.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

31. Was anyone else with you at the time you saw the object? *(Circle One)* Yes No

31.1 IF you answered YES, did they see the object too? *(Circle One)* Yes No

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

NAME [redacted] [redacted] _____
Last Name First Name Middle Name

ADDRESS [redacted] Dayton : Ohio
Street City Zone State

TELEPHONE NUMBER [redacted] AGE 14 SEX M

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

33. When and to whom did you report that you had seen the object?

_____ _____ _____
Day Month Year

34. Date you completed this questionnaire: _____ Day _____ Month _____ Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

~~Object~~

Object moved from West to East.
Lighting seemed to be continuous.

U.S. AIR FORCE TECHNICAL INFORMATION

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. 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?

~~Early of 1964~~ Spring or Summer 1964
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?

[redacted] ave Rokie Illinois
Nearest Postal Address City or Town State or County

5. How long was object in sight? (Total Duration) All night _____
Hours Minutes Seconds

a. Certain
(b.) Fairly certain
c. Not very sure
d. Just a guess

5.1 How was time in sight determined? Stayed up all night & watched

5.2 Was object in sight continuously? Yes ____ No ✓

6. What was the condition of the sky?

DAY	NIGHT
a. Bright	(a. Bright)
b. Cloudy	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

FTD FORM OCT 62 164 This form supersedes FTD 164, Jul 61, which is obsolete.

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. 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

10. The object appeared: *(Circle One)*:

a. Solid
b. Transparent
c. Vapor
d. As a light
e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? *(Circle One)*:

a. Brighter
b. Dimmer
c. About the same
d. Don't know

11.1 Compare brightness to some common object:

_____

12. 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 _____

13. 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

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

yes - in same spot & returned in same spot

15. 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: _____

16. 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: _____

17. Tell in a few words the following things about the object:

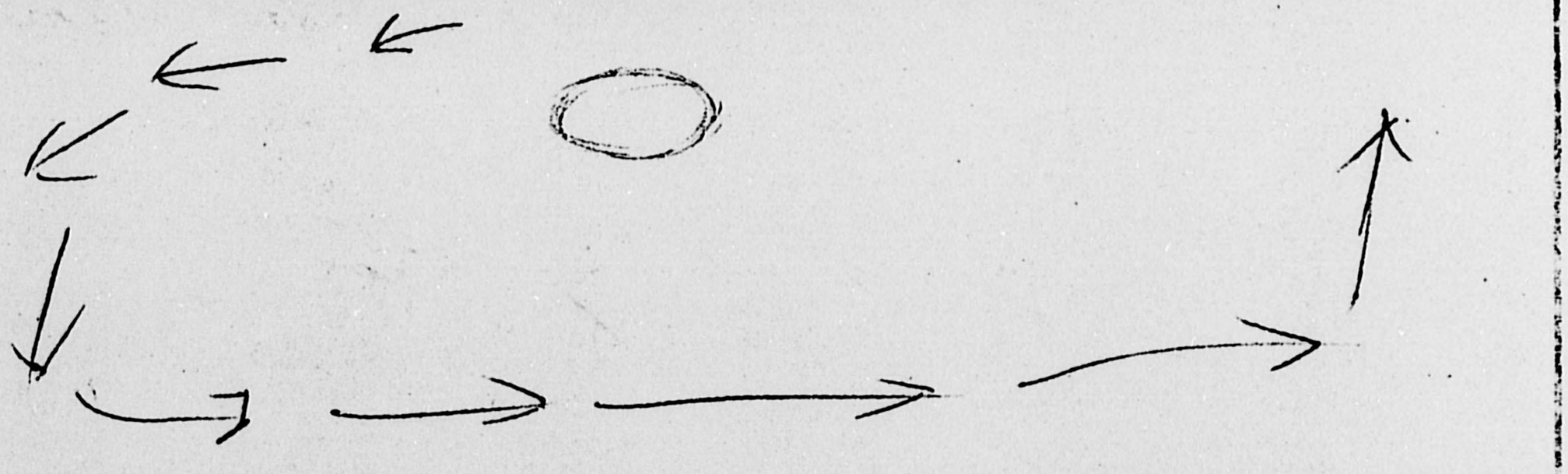
a. Sound No sound that I can remember

b. Color Fluorescent - white & turned red

18. 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?

None

19. 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.



20. 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? _____

21. 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? It appeared to be three blocks away

22. 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 _____

23. 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? — small airport field
e. Flying over a city?
f. Flying over open country?
g. Other _____

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

a. North c. East e. South g. West
b. Northeast d. Southeast f. Southwest h. Northwest

24.2 How fast were you moving? _____ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One) Yes No

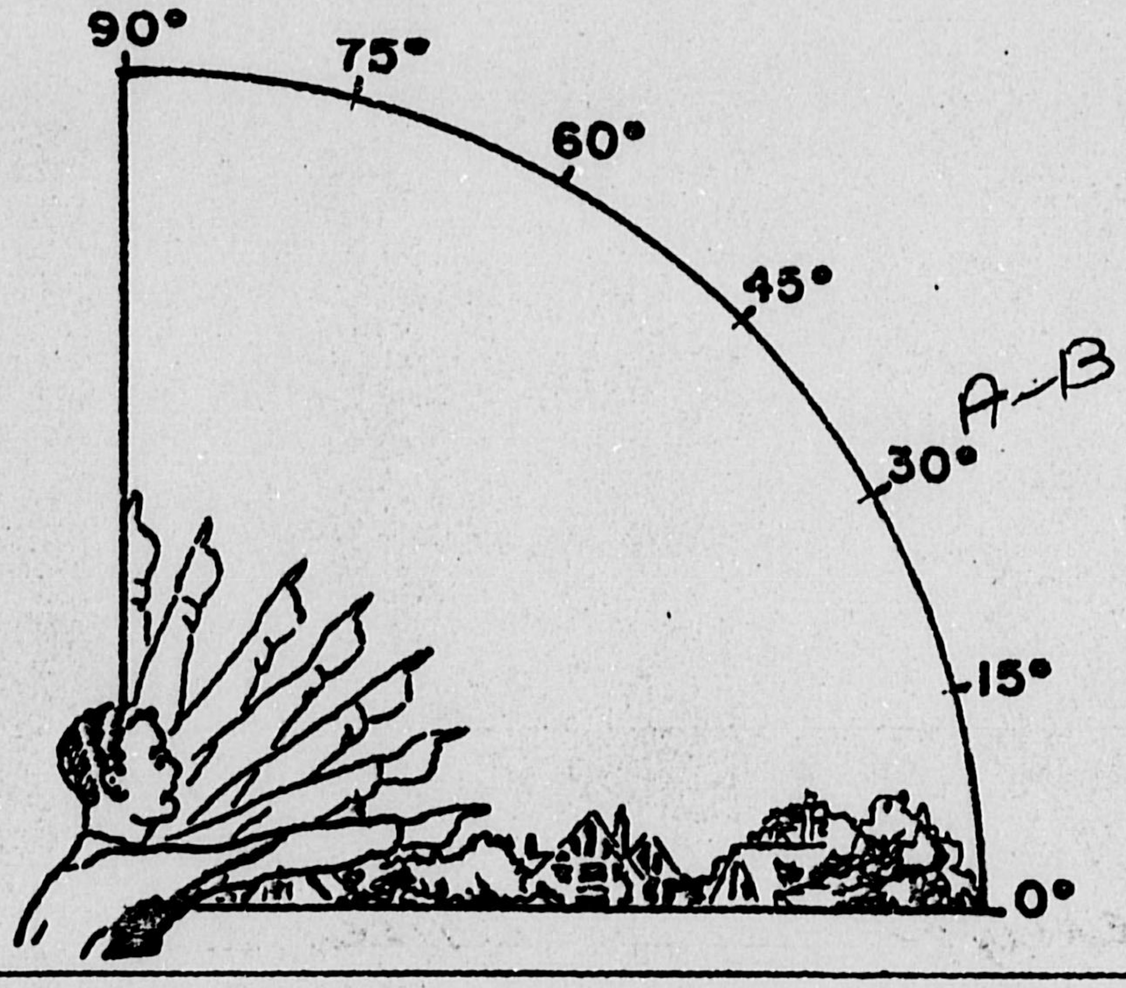
25. Did you observe the object through any of the following?

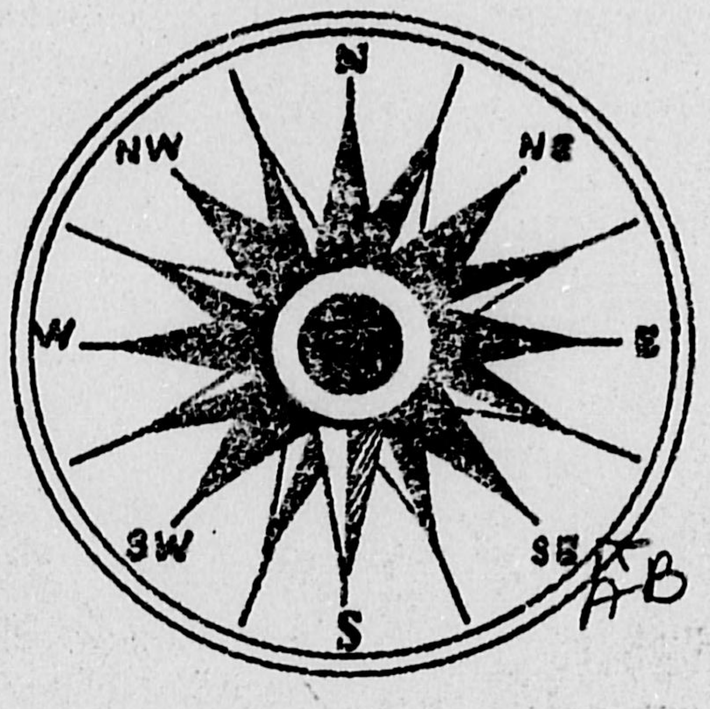
a. Eyeglasses	Yes	No	e. Binoculars	Yes	No
b. Sun glasses	Yes	No	f. Telescope	Yes	No
c. Windshield	Yes	No	g. Theodolite	Yes	No
d. Window glass	Yes	No	h. Other window screen		

26. 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.

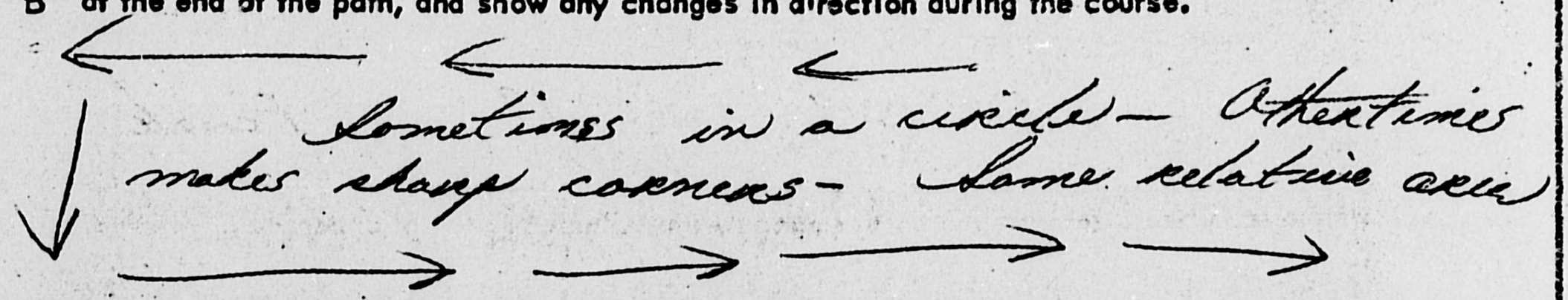
An enormous moving star.

27. 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. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.





28. 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.



29. 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.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

No

31. Was anyone else with you at the time you saw the object? *(Circle One)* Yes (No)

31.1 IF you answered YES, did they see the object too? *(Circle One)* Yes No

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

NAME [redacted] [redacted] [redacted]
Last Name First Name Middle Name

ADDRESS [redacted] Skokie Illinois
Street City Zone State

TELEPHONE NUMBER [redacted] AGE 19 SEX Female

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

33. When and to whom did you report that you had seen the object? — Professor Hynek
January 12 January 1966 Lt. Col. Moody
Day Month Year

34. Date you completed this questionnaire: 13 (Day) January (Month) 1966 (Year)

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

Information Only (No Case)
Cource: FSIC

Euclid, Ohio
may 67

MYSTERY RINGS IN EUCLID, OHIO

The remnants of two rings can be found on the back lawn of Mr. and Mrs. Albert C. Weber, a plumbing contractor.

Mr. Weber said that the most recent ring, which is easily distinguishable, appeared about three weeks ago. The older ring, still visible in parts, appeared in late April or May. Both rings are approximately 15 feet in diameter. A browned-out swath in the most recent ring is 1-2 feet wide, and forms a good circle. The Webers told Mr. Nice and the Editor that no deposits of any kind were seen by them anywhere in the area of the rings.

The older ring, on the left edge of their lawn, is 52 feet from the house; the newest ring is only 39 feet away, on the right edge.

Dirt and root samples will be tested. A Kent State University Professor said in the past, that these are the by-products of fungus growth. Pictures of the most recent ring were taken, as it is still visible.

WHAT MADE THE RINGS?

Mrs. Webber claims that just before the first ring appeared, she had undergone an eerie experience, and still isn't sure what she saw.

She had left her French poodles out at 3:00 A.M. As usual, she turned on the lights which illuminated the lawn of the back yard. The weather was misty and foggy, but she saw something that made the hair on her arms and head stand on end. Out there, on the left side, was a light colored object whose shape reminded her of a toy spinning top. The lower part was invisible. On the right side, vertically, stood a sail-like projection. The "top" stood about 6 feet tall.

She quickly called her dogs into the house, shut the door, doused the lights, and looked out the window. She could see nothing. She doesn't know why she didn't illuminate the area again.

She waited till 6:30 A.M. when her husband got up before she told him.

Soon after the first donut ring of burned-out grass appeared, 50 feet from the house. She noted that the dogs did not act up during this episode. Exact date unknown, but their guess was late April or early May.

Information Only
Source: The UFO Reporter, Summer, 1964

Walsenburg, Colorado
1 May 1964

May 1: Walsenburg, Colorado - A huge white, shiny UFO, with a hook beneath it, was reported descending from the west in evident preparation for a landing.

PROJECT 10073 RECORD CARD

1. DATE 16 May 64	2. LOCATION Dayton, Ohio	12. CONCLUSIONS ☐ Was Balloon ☐ Probably Balloon ☐ Possibly Balloon ☐ Was Aircraft ☒ Probably Aircraft ☐ Possibly Aircraft ☐ Was Astronomical ☐ Probably Astronomical ☐ Possibly Astronomical ☐ Other ☐ Insufficient Data for Evaluation ☐ Unknown
3. DATE-TIME GROUP Local GMT 16/0555Z	4. TYPE OF OBSERVATION ☒ Ground-Visual ☐ Ground-Radar ☐ Air-Visual ☐ Air-Intercept Radar	
5. PHOTOS ☐ Yes ☒ No	6. SOURCE civilian	
7. LENGTH OF OBSERVATION 4 seconds	8. NUMBER OF OBJECTS one	9. COURSE North

10. BRIEF SUMMARY OF SIGHTING

Greyish white object shaped like triangle making screeching noise in flight from South to North passing overhead and disappearing behind house. Large delta shaped wing. Sound preceeded object. Speed estimated as FAST. Straight flight. 15 yr old youth witness.

11. COMMENTS

Possible test vehicle from Wright-Field. Data indicates probable a/c observation. Many delta wing a/c at base.

ATIC FORM 329 (REV 26 SEP 52)

16 May 64
Dayton, Ohio

U.S. AIR FORCE TECHNICAL INFORMATION

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. 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?

16 (Day) MAY (Month) 1964 (Year)

2. Time of day: 12 (Hour) 55 (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] (Nearest Postal Address) Akron (City or Town) Ohio (State or County)

5. How long was object in sight? (Total Duration) _____ (Hours) _____ (Minutes) 4 (Seconds)

a. Certain
b. Fairly certain
c. Not very sure
d. Just a guess

5.1 How was time in sight determined? GUESS

5.2 Was object in sight continuously? Yes X No ____

6. What was the condition of the sky?

DAY	NIGHT
a. Bright	a. Bright
b. Cloudy	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

FORM FTD OCT 62 164 This form supersedes FTD 164, Jul 61, which is obsolete.

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. 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

10. The object appeared: *(Circle One)*:

a. Solid
b. Transparent
c. Vapor
(d.) As a light
e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? *(Circle One)*:

a. Brighter
b. Dimmer
(c.) About the same
d. Don't know

11.1 Compare brightness to some common object:

_____

12. The edges of the object were:

WING SHAPED

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

e. Other _____

13. 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

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

disappeared behind trees

15. 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: behind trees

16. 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:

17. Tell in a few words the following things about the object:

a. Sound Screeching sound just before seeing it.

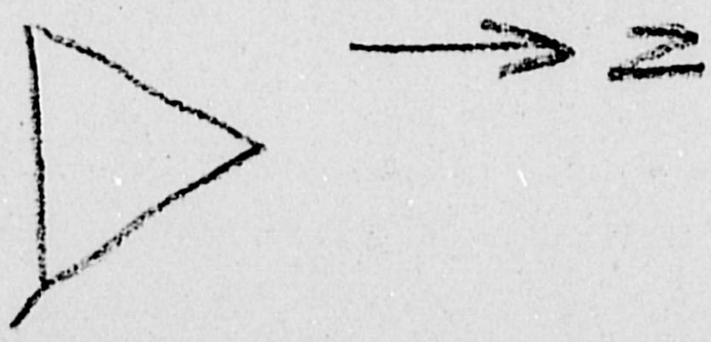
b. Color Bright white

18. 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?

No Go

19. 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.



20. 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? FAST

21. 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? _____

22. 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 _____

23. 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 _____

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

a. North c. East e. South g. West
b. Northeast d. Southeast f. Southwest h. Northwest

24.2 How fast were you moving? _____ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One) Yes No

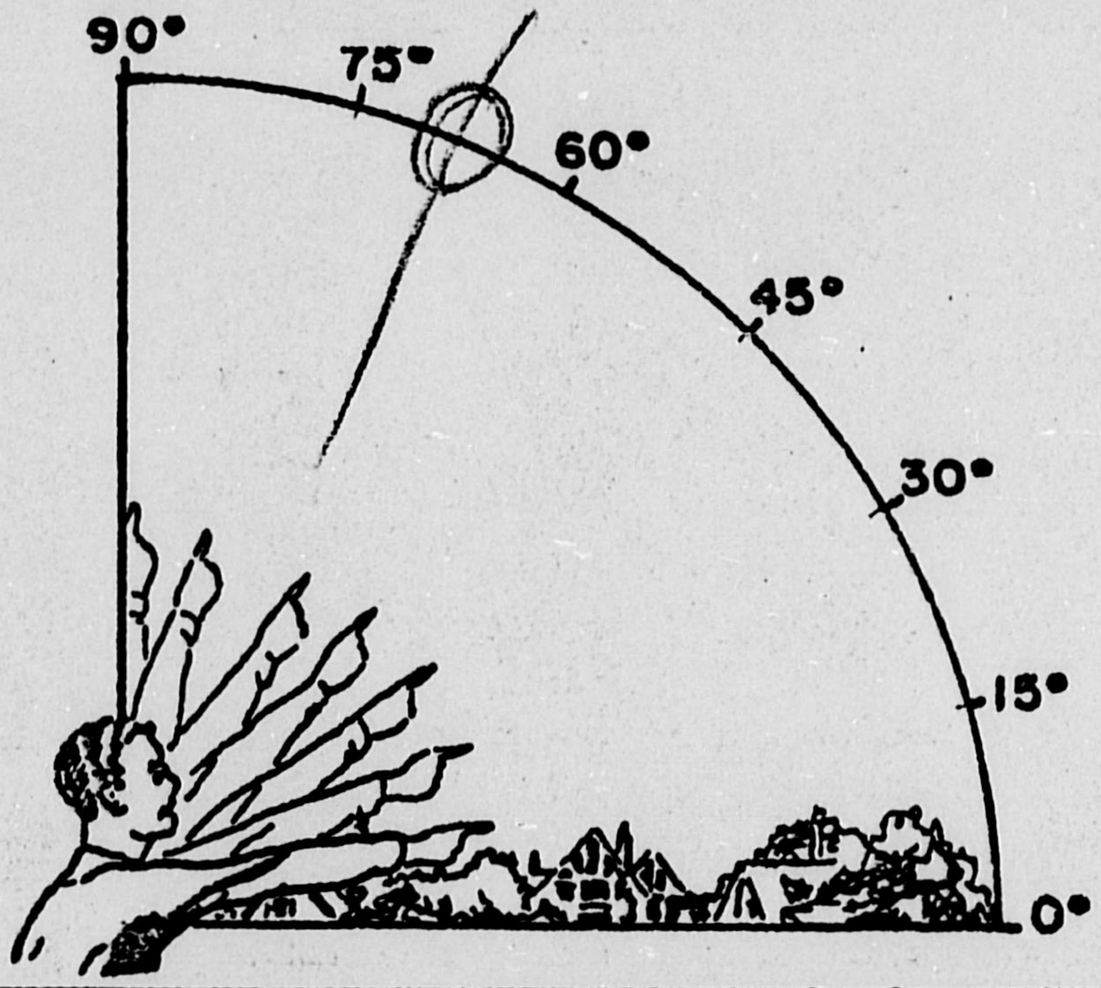
25. Did you observe the object through any of the following?

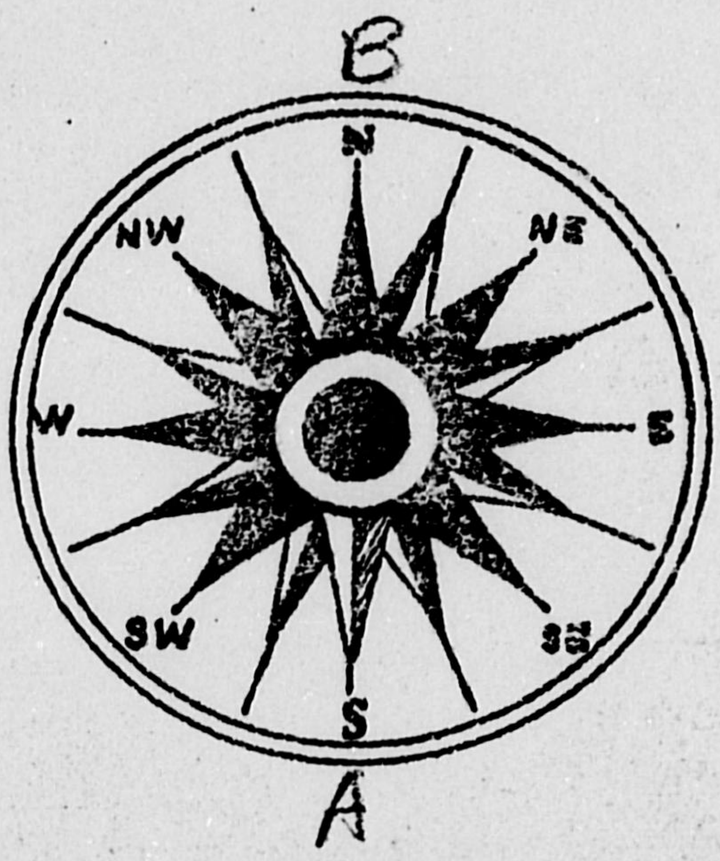
a. Eyeglasses	Yes	No	e. Binoculars	Yes	No
b. Sun glasses	Yes	No	f. Telescope	Yes	No
c. Windshield	Yes	No	g. Theodolite	Yes	No
d. Window glass	Yes	No	h. Other _____		

26. 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.

Large flying wing.

27. 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. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.





28. 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.

29. IF there was MORE THAN ONE object, then how many were there? 1

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

NO

31. Was anyone else with you at the time you saw the object? *(Circle One)* (Yes) No

31.1 IF you answered YES, did they see the object too? *(Circle One)* (Yes) No

31.2 Please list their [redacted] and addresses:

[redacted] NO

32. Please give the following [redacted] about yourself:

NAME [redacted] Middle Name Dale

ADDRESS [redacted] Street City Zone State

TELEPHONE NUMBER [redacted] AGE 15 SEX M

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

33. When and to whom did you report that you had seen the object?

_____ Day _____ Month _____ Year

34. Date you completed this questionnaire: 16 (Day) MAY (Month) 69 (Year)

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

PROJECT 10073 RECORD CARD

1. DATE 16 May 64	**2. LOCATION** Dayton, Ohio	**12. CONCLUSIONS** ☐ Was Balloon ☐ Probably Balloon ☐ Possibly Balloon ☐ Was Aircraft ☐ Probably Aircraft ☐ Possibly Aircraft ☐ Was Astronomical ☐ Probably Astronomical ☐ Possibly Astronomical ☐ Other_____ ☒ Insufficient Data for Evaluation ☐ Unknown
3. DATE-TIME GROUP Local _____ GMT 17/0305Z	**4. TYPE OF OBSERVATION** ☒ Ground-Visual ☐ Ground-Radar ☐ Air-Visual ☐ Air-Intercept Radar	
5. PHOTOS ☐ Yes ☒ No	**6. SOURCE** civilian	
7. LENGTH OF OBSERVATION not reported	**8. NUMBER OF OBJECTS** not reported	**9. COURSE** not reported

10. BRIEF SUMMARY OF SIGHTING

Witness stated that he saw something in sky. Had to answer door. Stated tht he would call back. No return call.

11. COMMENTS

INSUFFICIENT DATA FOR ANALYSIS.

ATIC FORM 329 (REV 26 SEP 52)

U.S. AIR FORCE TECHNICAL INFORMATION

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. 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?

16 (Day) May (Month) 64 (Year)

2. Time of day: 1025 Local
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 County

5. How long was object in sight? (Total Duration) _____ Hours _____ Minutes _____ Seconds

a. Certain
b. Fairly certain
c. Not very sure
d. Just a guess

5.1 How was time in sight determined? _____

5.2 Was object in sight continuously? Yes _____ No _____

6. What was the condition of the sky?

DAY	NIGHT
a. Bright	a. Bright
b. Cloudy	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

FTD FORM OCT 62 164 This form supersedes FTD 164, Jul 61, which is obsolete.

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. 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

10. The object appeared: *(Circle One)*:

a. Solid
b. Transparent
c. Vapor
d. As a light
e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? *(Circle One)*:

a. Brighter
b. Dimmer
c. About the same
d. Don't know

11.1 Compare brightness to some common object:

_____

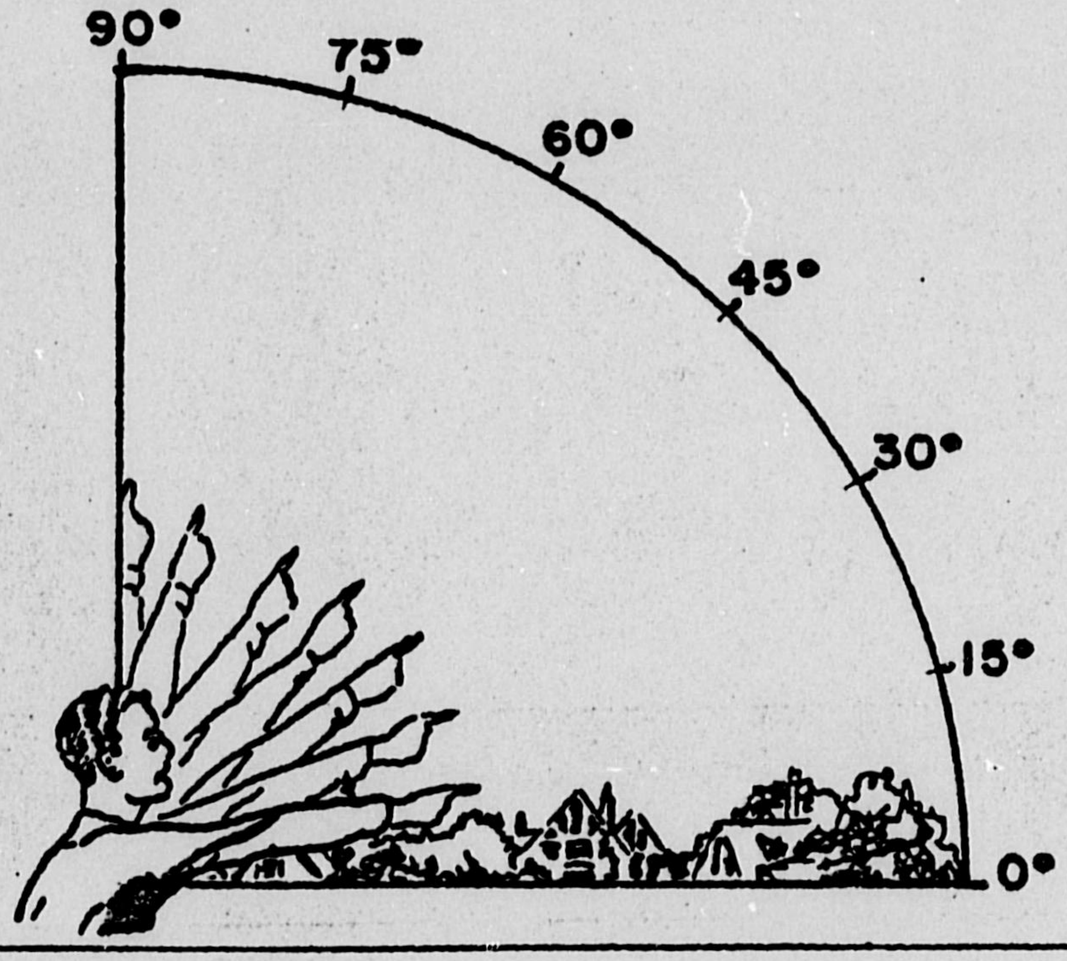
12. The edges of the object were:

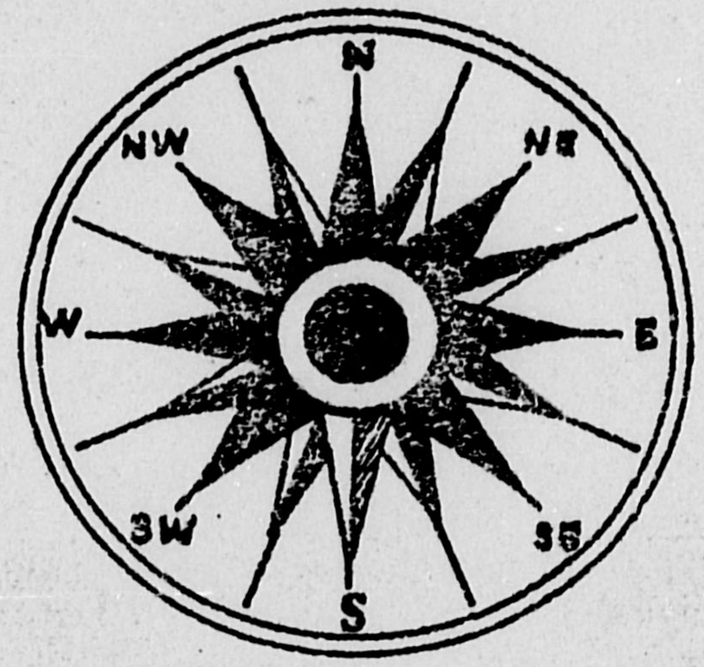
(Circle One):
a. Fuzzy or blurred
b. Like a bright star
c. Sharply outlined
d. Don't remember
e. Other _____

13. 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

27. 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. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.





28. 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.

29. 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.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

31. Was anyone else with you at the time you saw the object? *(Circle One)* Yes No

31.1 IF you answered YES, did they see the object too? *(Circle One)* Yes No

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

(spelling may not be right)

NAME [redacted] [redacted] _____
Last Name First Name Middle Name

ADDRESS [redacted] Dayton _____ _____
Street City Zone State

TELEPHONE NUMBER _____ AGE _____ SEX _____

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

33. When and to whom did you report that you had seen the object?

_____ _____ _____
Day Month Year

34. Date you completed this questionnaire: _____ Day _____ Month _____ Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

Mr [redacted] called at 2250, 16 May 1964. He stated that he had heard a report on a local radio station about lights in the sky. He seemed to think that the Air Force would not take him seriously. He began to answer my questions, when he said someone was at the door and would have to hang up, but would call back in a few minutes. He failed to do this. His son also stated that he saw "something" in the sky.

Lt. Charles Anspaugh
FTD Duty Officer 16 May 64