PROJECT 10073 RECORD

1. DATE - TIME GROUP 17 September 65 18/0045Z	**2. LOCATION** Kettering & Dayton, Ohio
3. SOURCE Civilian	**10. CONCLUSION** Satellite (ECHO II) ✓
4. NUMBER OF OBJECTS One	Object characteristic of Satellite. ECHO II over city at 743 PM to the West at 48 deg elevation in flight to NE.
5. LENGTH OF OBSERVATION Seconds	**11. BRIEF SUMMARY AND ANALYSIS** Object brighter than a star, white, South to North flight. Two reports. 2-3 times brighter than a star of 1st magnitude.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE North	
8. PHOTOS ☐ Yes ☒ No	
9. PHYSICAL EVIDENCE ☐ Yes ☒ No	

FORM
FTD SEP 63 0-329 (TDE) Previous editions of this form may be used.

18/0001Z Dayton Ohio

17 Sept

Echo II 734PM W of City 40° elev → NE.

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?

17 (Day) SEPT. (Month) 1965 (Year)

2. Time of day: 7:45 (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) _____ (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? Guess

5.2 Was object in sight continuously? Yes ✓ No ____

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

FTD FORM OCT 62 164 This form supersedes FTD 164, Jul 61, which is obsolete.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

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: _____

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

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?

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?
e. Flying over a city?
f. Flying over open country?
g. Other Back Yard

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
b. Northeast
c. East
d. Southeast
e. South
f. Southwest
g. West
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?

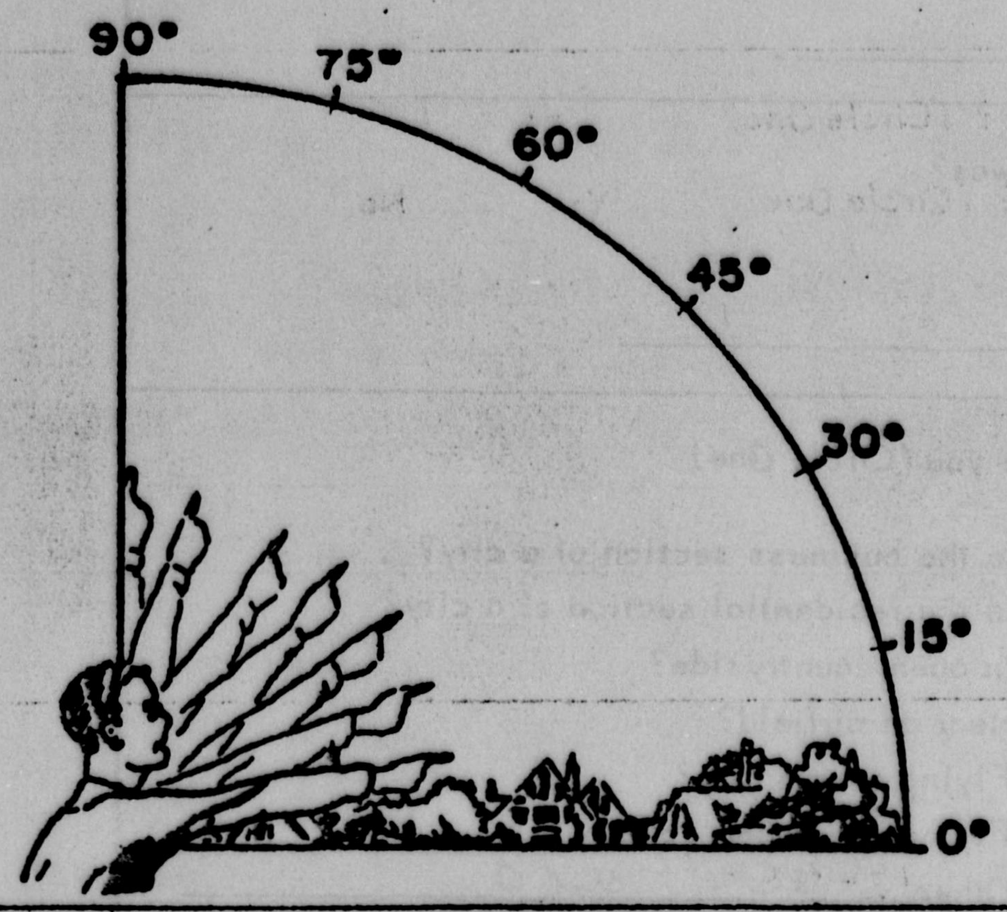
(Circle One) Yes No

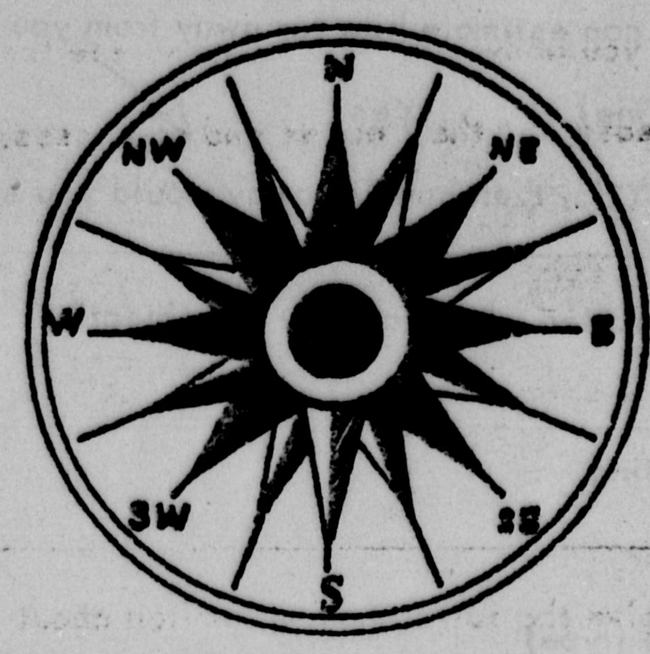
25. Did you observe the object through any of the following?

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.

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.

Traveled in the general direction of South to north from point of observation.

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] Last Name [redacted] First Name _____ Middle Name

ADDRESS [redacted] Street DAYTON City 39 Zone OHIO State

TELEPHONE NUMBER [redacted] AGE _____ 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?

17 Day SEPT. Month 1965 Year

CT. Fiorino
FTD Do

18/0445Z - KETTERING, OHIO 17 SEPT

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?

17 (Day) SEPT. (Month) 1965 (Year)

2. Time of day: 7:45 (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?

KETTERING, OHIO

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? Guess

5.2 Was object in sight continuously? Yes ✓ No ____

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

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: 2 to 3 times as bright as a first magnitude star

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: _____

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:

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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?

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?
e. Flying over a city?
f. Flying over open country?
g. Other Back Yard

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

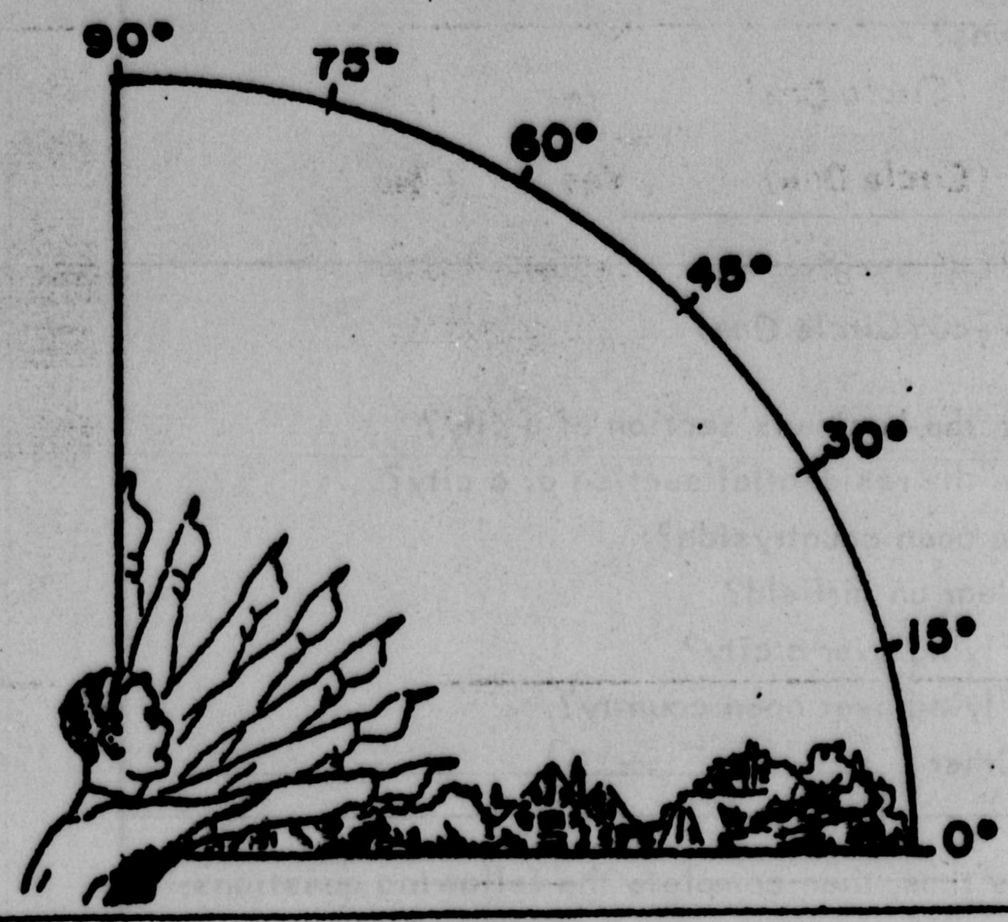
25. Did you observe the object through any of the following?

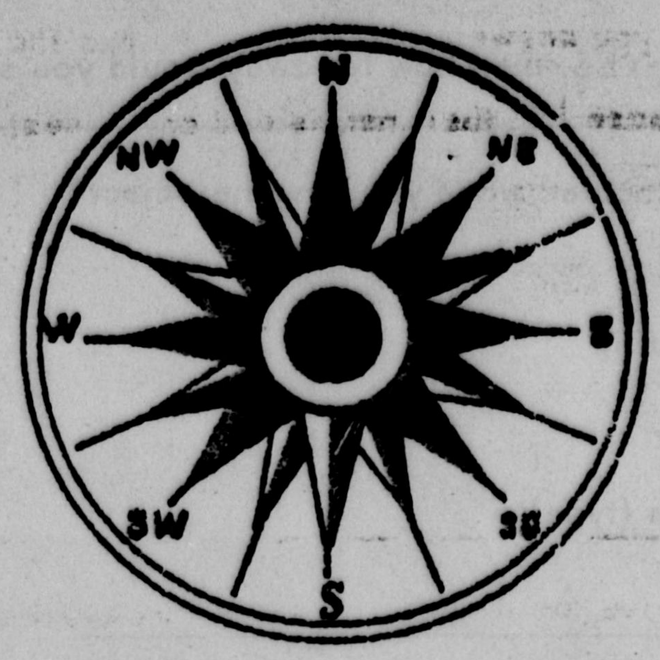
a. Eyeglasses	Yes	No	e. Binoculars	Yes	No
b. Sun glasses	Yes	No	f. Telescope	Yes	No
c. Windshield	Yes	No	g. Theodolite	Yes	No
d. Window glass	Yes	No	h. Other _____		

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.

_____

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.

Traveled in the general direction of South to North from point of observation.

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] Last Name [redacted] First Name _____ Middle Name

ADDRESS [redacted] Street [redacted] City _____ Zone Ohio State

TELEPHONE NUMBER [redacted] AGE _____ 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?

17 Day SEPT. Month 1965 Year

Lt. Fiorino
FTD >0

PROJECT 10073 RECORD

1. DATE - TIME GROUP 21 September 65 22/0230Z	2. LOCATION Kettering, Ohio
3. SOURCE Civilian	10. CONCLUSION Astro (VENUS)
4. NUMBER OF OBJECTS One	VENUS Setting at 240 deg azimuth. Object characteristic of an Astro Body.
5. LENGTH OF OBSERVATION 30 Minutes	11. BRIEF SUMMARY AND ANALYSIS Three colored balls pressed togather. Erratic motion confined to 200 deg azimuth. Seemed to be at a distance of the stars. Appeared as solid. Light only observed. Disappeared beyond trees on horizon. Moved slowly.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE Stationary (Erratic Motion)	
8. PHOTOS ☐ Yes ☒ No	
9. PHYSICAL EVIDENCE ☐ Yes ☒ No	

FORM
FTD SEP 63 0-329 (TDE) Previous editions of this form may be used.

21 Sept

U.S. AIR FORCE TECHNICAL INFORMA[redacted]

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1. When did you see the object?

21 (Day) Sept (Month) 1965 (Year)

2. Time of day: 2030 (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) Kettering (City or Town) Ohio (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? Estimate

5.2 Was object in sight continuously? Yes ✓ No ____

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

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 bright
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:

as bright as looking at a different bright lamp

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

I would say it was a short minute flash
I didn't observed it long enough to know.

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

Yes it appeared to go down behind the [illegible] [illegible]

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: [illegible]

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 [illegible]

b. Color [illegible]

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?

It would have been completely covered by the match head even though it was [illegible]

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) Moved the [illegible] Check Line

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:

24.1 What direction were you moving? (Circle One)

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

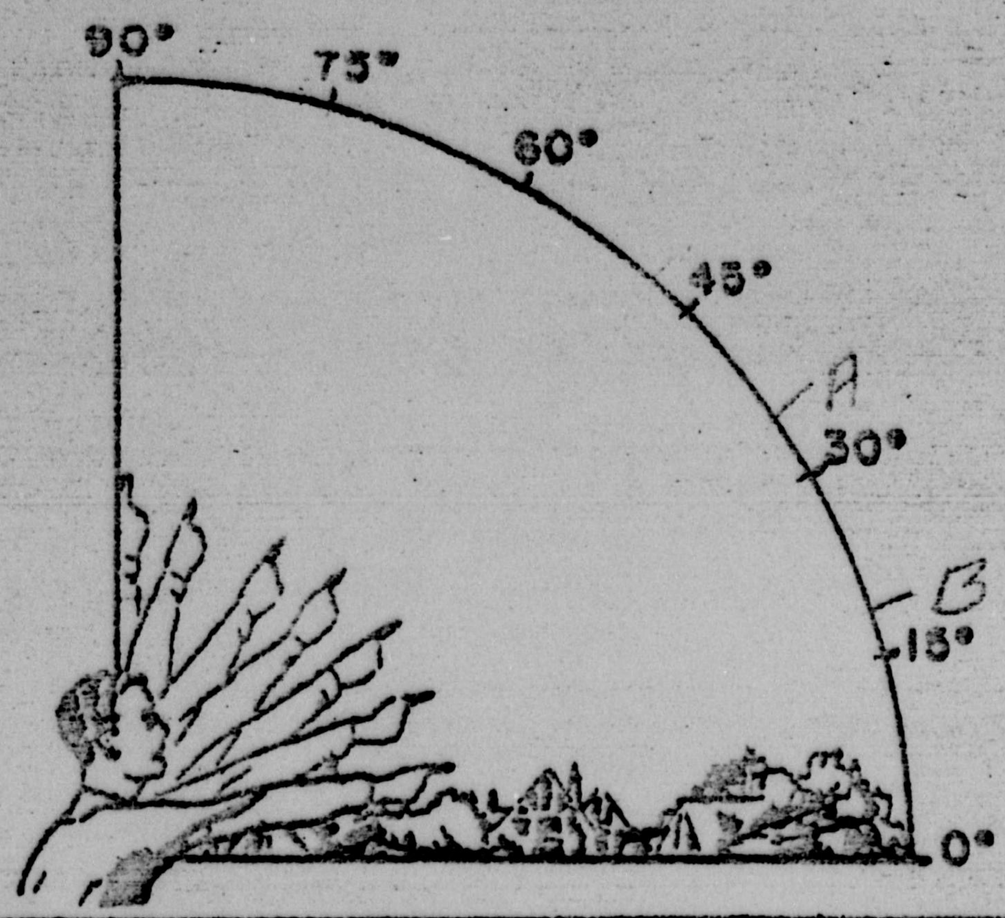
25. Did you observe the object through any of the following?

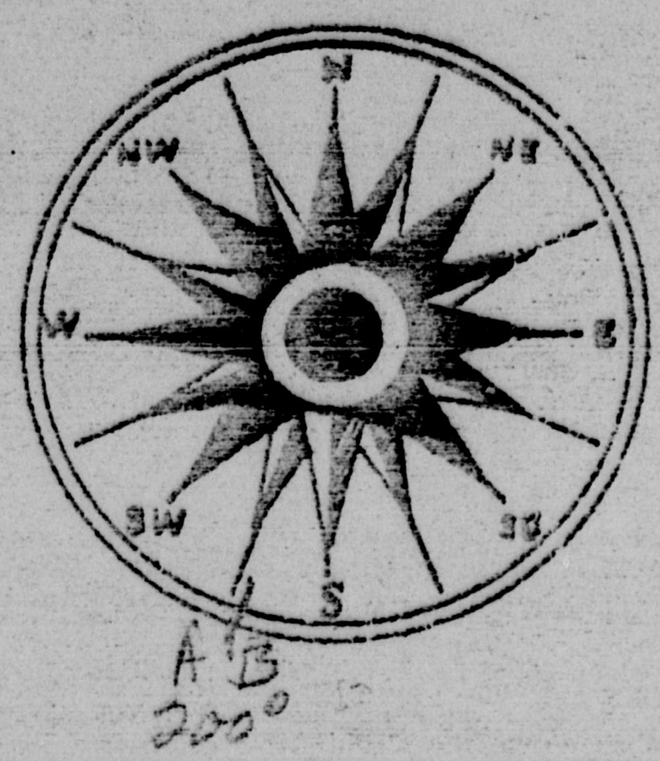
a. Eyeglasses	Yes	No	e. Binoculars	(Yes)	No
b. Sun glasses	Yes	No	f. Telescope	Yes	No
c. Windshield	Yes	No	g. Theodolite	Yes	No
d. Window glass	Yes	No	h. Other Make [illegible]		

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.

[illegible]

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? one only

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.

Never seen this or similar objects

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]

home address

[redacted] (14 years)

[redacted]

Kettering

32. Please give the following information about yourself:

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

ADDRESS [redacted] Kettering 45429 Ohio
Street City Zone State

TELEPHONE NUMBER [redacted] AGE 14 SEX Male

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

just high school student with 20-20 vision

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

21 Sept 1965
Day Month Year

only the operator on the Duty officer

34. Date you completed this questionnaire: 21 (Day) Sept (Month) 1965 (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.

Informant felt the object definitely was not a toy airplane or balloon.

Informant said children seemed to see the same or a similar object last Saturday night - It went straight up and down and appeared to be red, but no one was told about it until Tues. In same location didn't move.
Yesterday and 12 and 9 years.
Mother was in hospital and father was visiting them