

PROJECT 10073 RECORD

1. DATE - TIME GROUP 18 June 66 19/0310Z	2. LOCATION Blacklick, Ohio one witness
3. SOURCE Civilian	10. CONCLUSION (other) INSUFFICIENT DATA FOR EVALUATION
4. NUMBER OF OBJECTS One	11. BRIEF SUMMARY AND ANALYSIS SEE CASE
5. LENGTH OF OBSERVATION Varied	
6. TYPE OF OBSERVATION Ground Visual	
7. COURSE Varied	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2245

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?	2. Time of day: <u>10</u> <u>10</u> Hour Minutes	
<u>18</u> Day <u>JUNE</u> Month <u>1966</u> Year	(Circle One): A.M. or <u>P.M.</u>	
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] RD	City or Town: <u>BLACKLICK</u>	State or County: <u>OHIO</u>
Nearest Postal Address		
5. How long was object in sight? (Total Duration)	<u>STILL IN SIGHT</u> 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 <u>X</u>	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FTD OCT 62 164 This form supersedes FTD 164, Jul 61, which is obsolete.

Send 18

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):

11.1 Compare brightness to some common object:

SOME THINGS ON FIRE

12. The edges of the object were:

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

c. Other Don't Know

13. Did the object:

- a. Appear to stand still at any time?
- b. Suddenly speed up and rush away at any time?
- c. Break up into parts or explode?
- d. Give off smoke?
- e. Change brightness?
- f. Change shape?
- g. Flash or flicker?
- h. Disappear and reappear?

(Circle One for each question)

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 it moved in front of:

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

a. Sound NONE

b. Color RED + WHITE - CHANGING TO ORANGE

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

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.

A LIGHT, MOVING FROM A SET POSITION UP AND DOWN AND TO THE SIDES, BUT ALWAYS RETURNING TO ITS ORIGINAL POSITION.

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? PRETTY 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

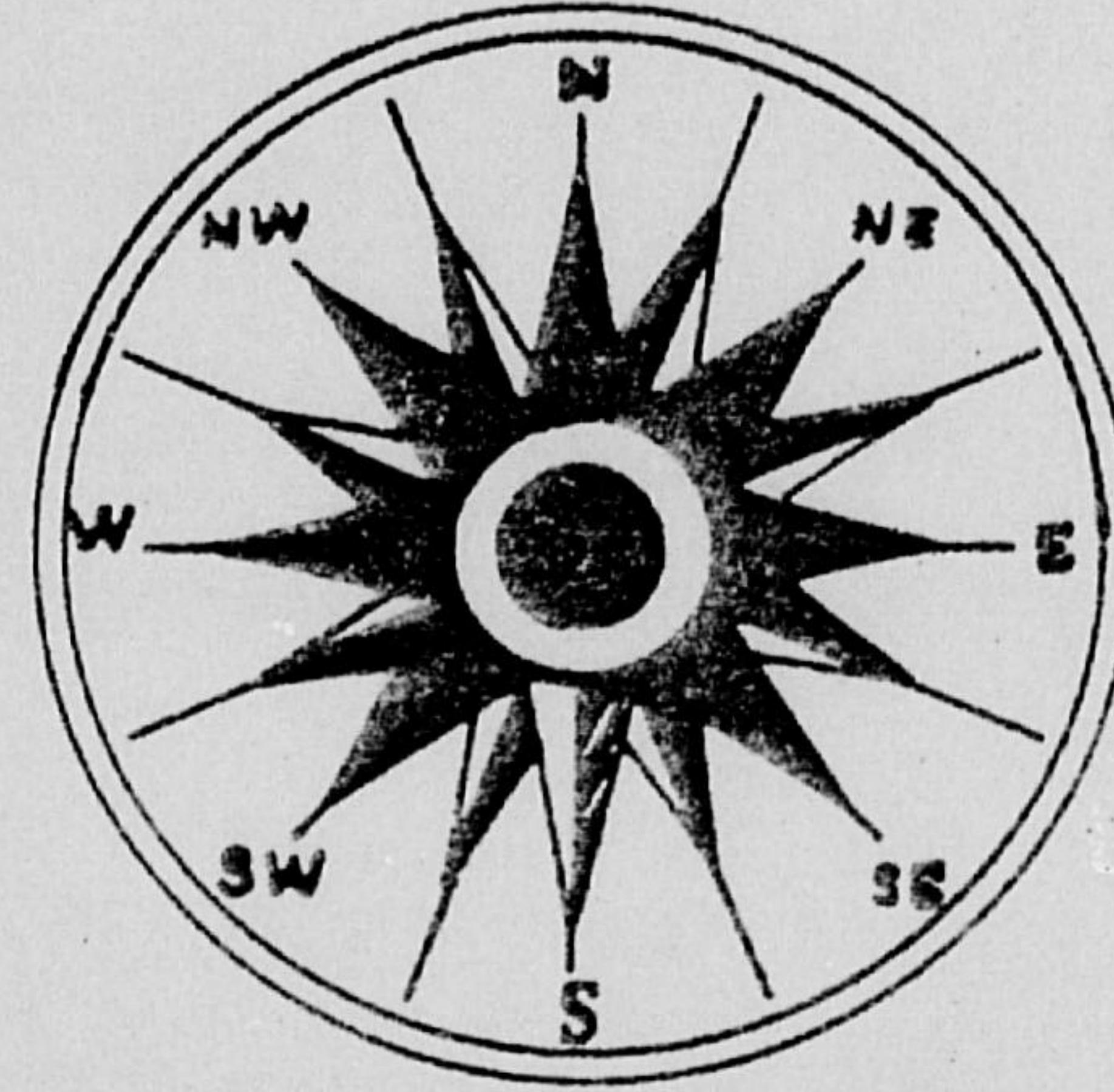
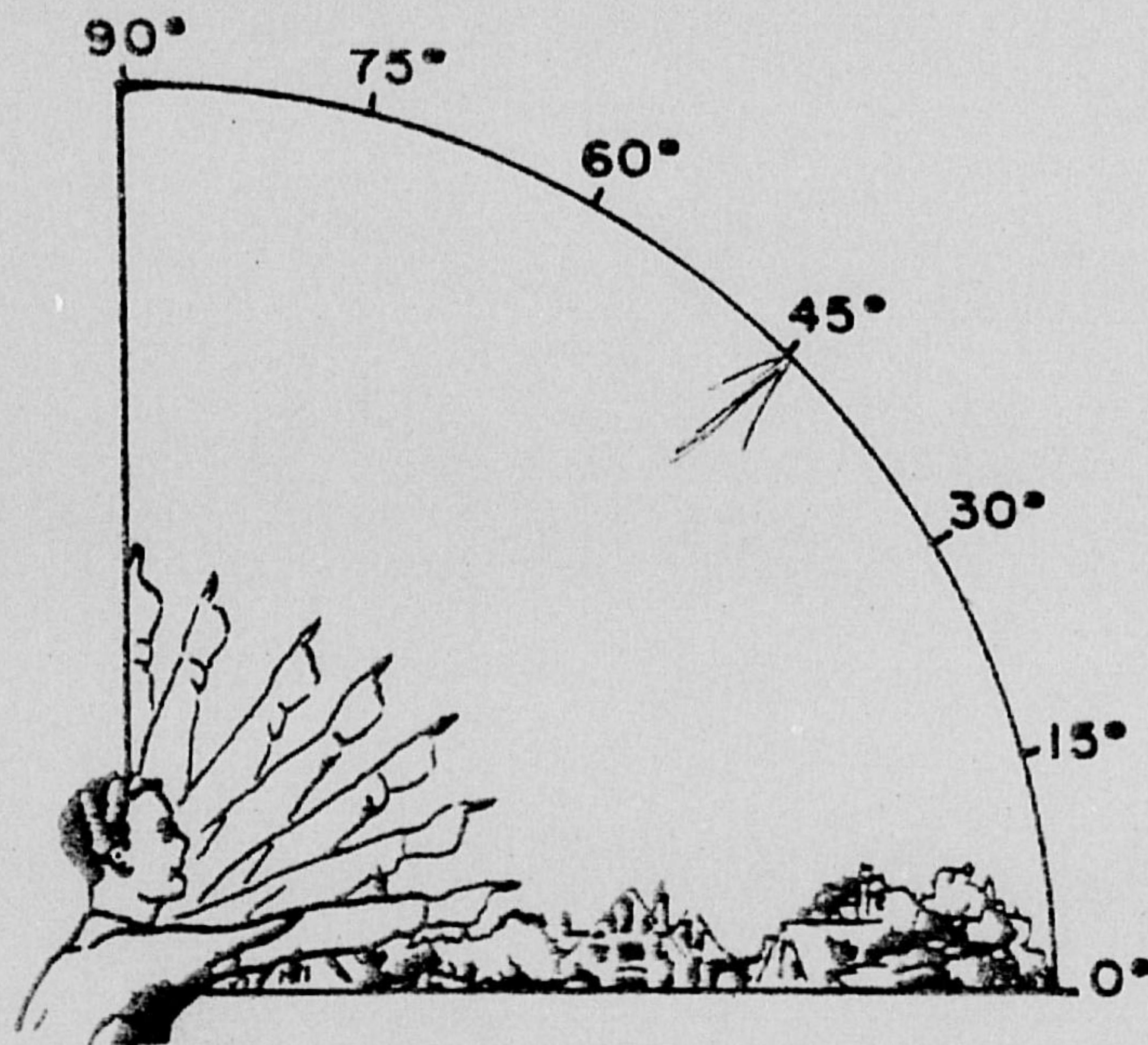
25. Did you observe the object through any of the following?

a. Eyeglasses	Yes	<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	_____	_____

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.

A 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.

AD

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:

HUSBAND

32. Please give the following information about yourself:

NAME

Last Name

First Name

Middle Name

ADDRESS

Street

BLACKLICK

43004

City

Zone

State

TELEPHONE NUMBER

AGE

26

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?

18

JUNE

66

Day

Month

Year

CAPT FOR DAN, 840 COMM POST

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.

18 JUNE 1966

1. WINDS 1900 BST

5 m 3606

10 m 3610

15 m 3110

20 m 2905

30 m 2915

40 m 2530

50 m 2730

2. WEATHER LCH

2100E 10u 0205

2200E 10u 0402

2300E 10u Calm

0000E 10u Calm

NAME OF REPORTING OFFICER:

Investigation has revealed that both military and civil aircraft were in the vicinity and in the general direction given on the report. The description leaves no doubt that this sighting was indeed an aircraft.

James D. Ballsmith
JAMES D. BALLSMITH
Capt., USAF

Blacklick, Ohio 18 June

Drayff Date

FTD (TDETR)
Wright- Patterson AFB, Ohio
2 August 1966

[REDACTED]
Blacklick, Ohio

Dear Mr. [REDACTED]

Reference your unidentified observation of 18 June 1966. The information which we have received is not sufficient for evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided.

We wish to thank you for reporting your observation to the Air Force.

Sincerely,

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HECTOR QUINTANILLA, Jr, Major, USAF
Chief, Project Blue Book