

PROJECT 10073 RECORD

1. DATE - TIME GROUP 2 Sept 66 3/0140Z	2. LOCATION New Carlisle, Ohio (one witness)
3. SOURCE Civilian	10. CONCLUSION (other) INSUFFICIENT DATA FOR EVALUATION
4. NUMBER OF OBJECTS Two	
5. LENGTH OF OBSERVATION 5 minutes	11. BRIEF SUMMARY AND ANALYSIS SEE CASE
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	

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

New Carlisle, O.

2 Sept. 66

Orville H. Ditz

FTD (TDETR) MU
Wright-Patterson AFB, Ohio 45433
6 September 1966

Jones.

New Carlisle, Ohio 45344

Dear Mr. ██████████,

Reference your unidentified observation of 2 September 1966. The information which we have received was not sufficient for evaluation. Request you complete the attached FTD Form 164 and return it in the enclosed envelope.

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

Sincerely,

~~(T)~~
HECTOR QUINTANILLA, Jr, Major, USAF
Chief, Project Blue Book

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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 SEP 66
Day Month Year

2. Time of day: 8 35-40
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?

R_____

Nearest Postal Address

Rt. 1 NEW CARLISLE

OHIO

City or Town

State or County

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

0 5 0
Hours Minutes Seconds

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

5.1 How was time in sight determined? CHECKED WATCH

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

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:

BRIGHTER THAN AN AIRPLANE LIGHT

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?
- 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?

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 _____ LIKE A STAR

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?

2/3

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.

POINT SOURCE

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:

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

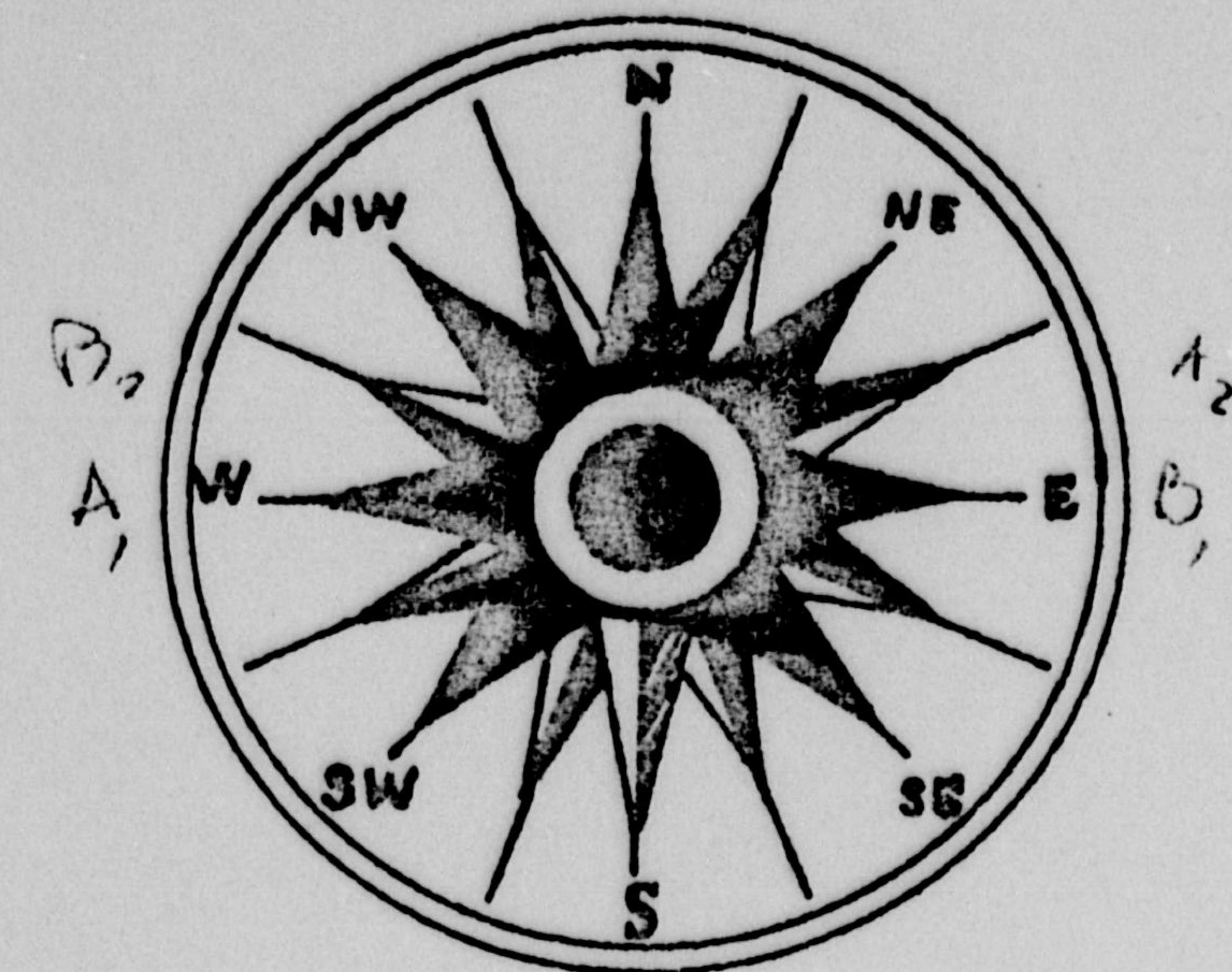
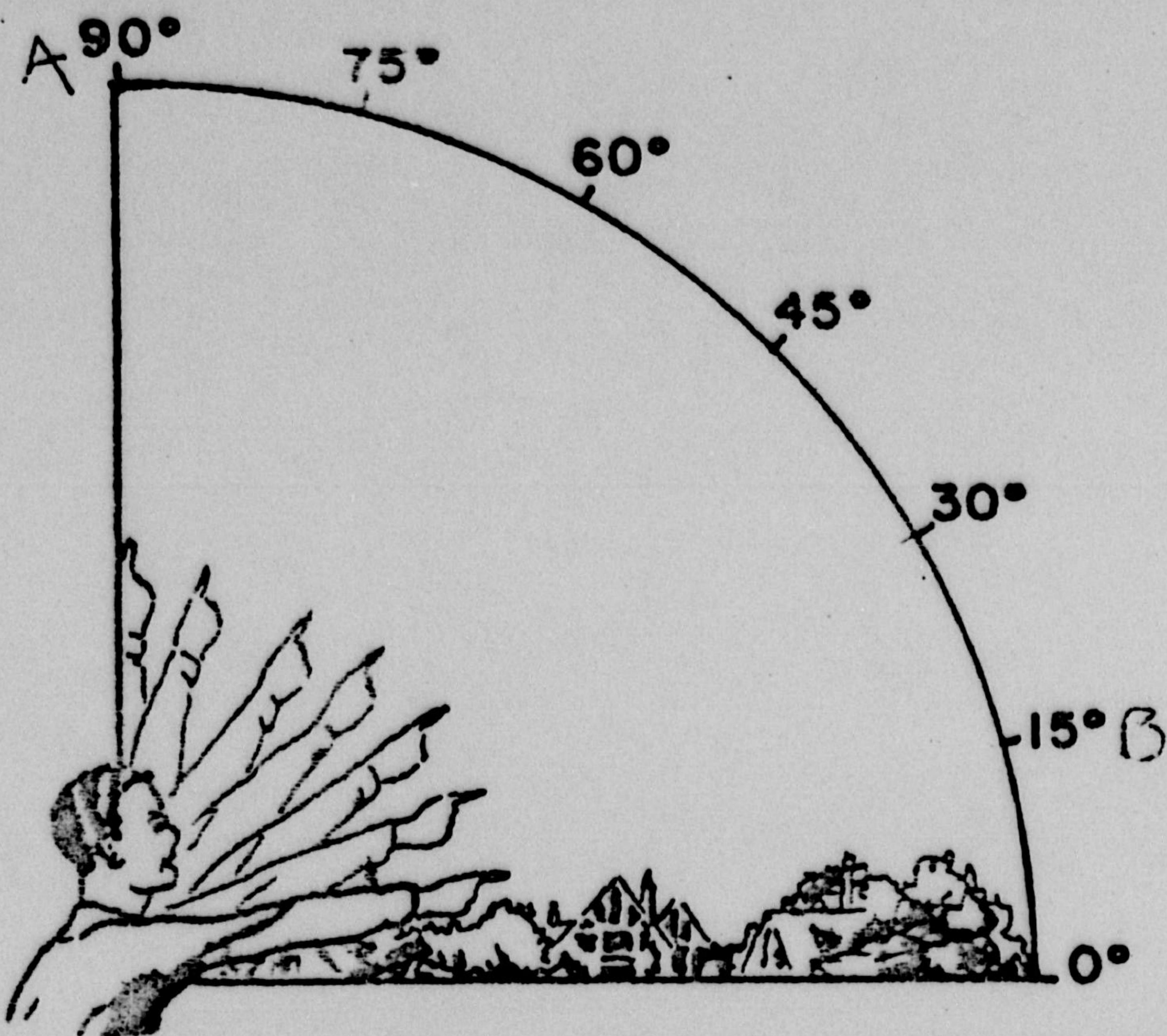
25. Did you observe the object through any of the following?

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		

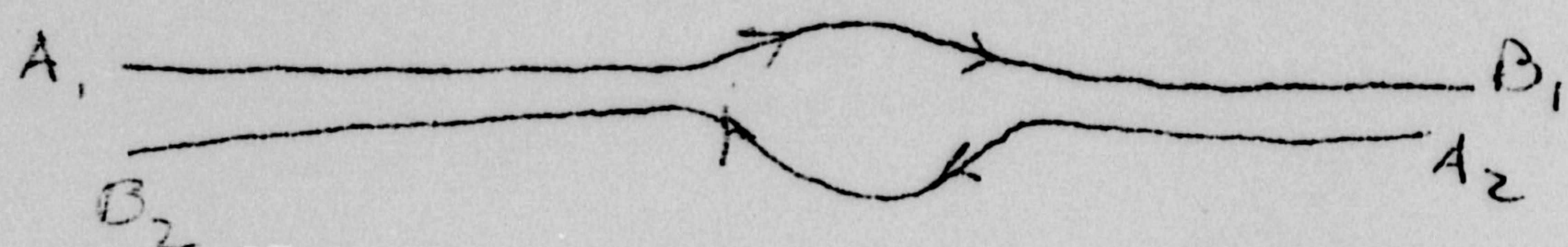
26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

A BRIGHT 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? 2

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:

WIFE - MRS [REDACTED]

SAME ADDRESS AS BELOW

32. Please give the following information about yourself:

NAME	[REDACTED]	[REDACTED]	[REDACTED]
	Last Name	First Name	Middle Name
ADDRESS	R+1.	NEW CARLISLE	OHIO
	Street	City	Zone
TELEPHONE NUMBER	[REDACTED]	AGE 24	SEX M
			45344

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?

FTD DUTY OFFICER

2 SEP 66

1LT. B.T. MADDEN

Day

Month

Year

34. Date you completed this questionnaire:

2

SEP

66

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

1. DATE - TIME GROUP 4 Sept 66 5/0355Z	2. LOCATION New Carlisle, Ohio
3. SOURCE Military	10. CONCLUSION (other) INSUFFICIENT DATA FOR EVALUATION
4. NUMBER OF OBJECTS One	
5. LENGTH OF OBSERVATION 5 seconds	11. BRIEF SUMMARY AND ANALYSIS SEE CASE
6. TYPE OF OBSERVATION Ground Visual	
7. COURSE SW-SE	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

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U.S. AIR FORCE TECHNICAL INFORMATION

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1. When did you see the object?

4 Sept 66
Day Month Year

2. Time of day: 22 55
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?

Newark Ohio

Nearest Postal Address

City or Town

State or County

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

Hours Minutes 5
Seconds

a. Certain c. Not very sure
b. Fairly certain 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
a. Bright
b. Cloudy

NIGHT
a. Bright
b. Cloudy

Cloudy scattered

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

11.1 Compare brightness to some common object:

acre 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 loading & del. - sample

13. Did the object:

(Circle One for each question)

- 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?

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

Yes - behind cloud

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:

Cloud

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

b. Color

white ball with blue tail

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? *1st impression was it would fall in Duluth on Willowánchez from intersection of 69 & 10*

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? 60 miles per hour.

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

(Circle One) Yes No

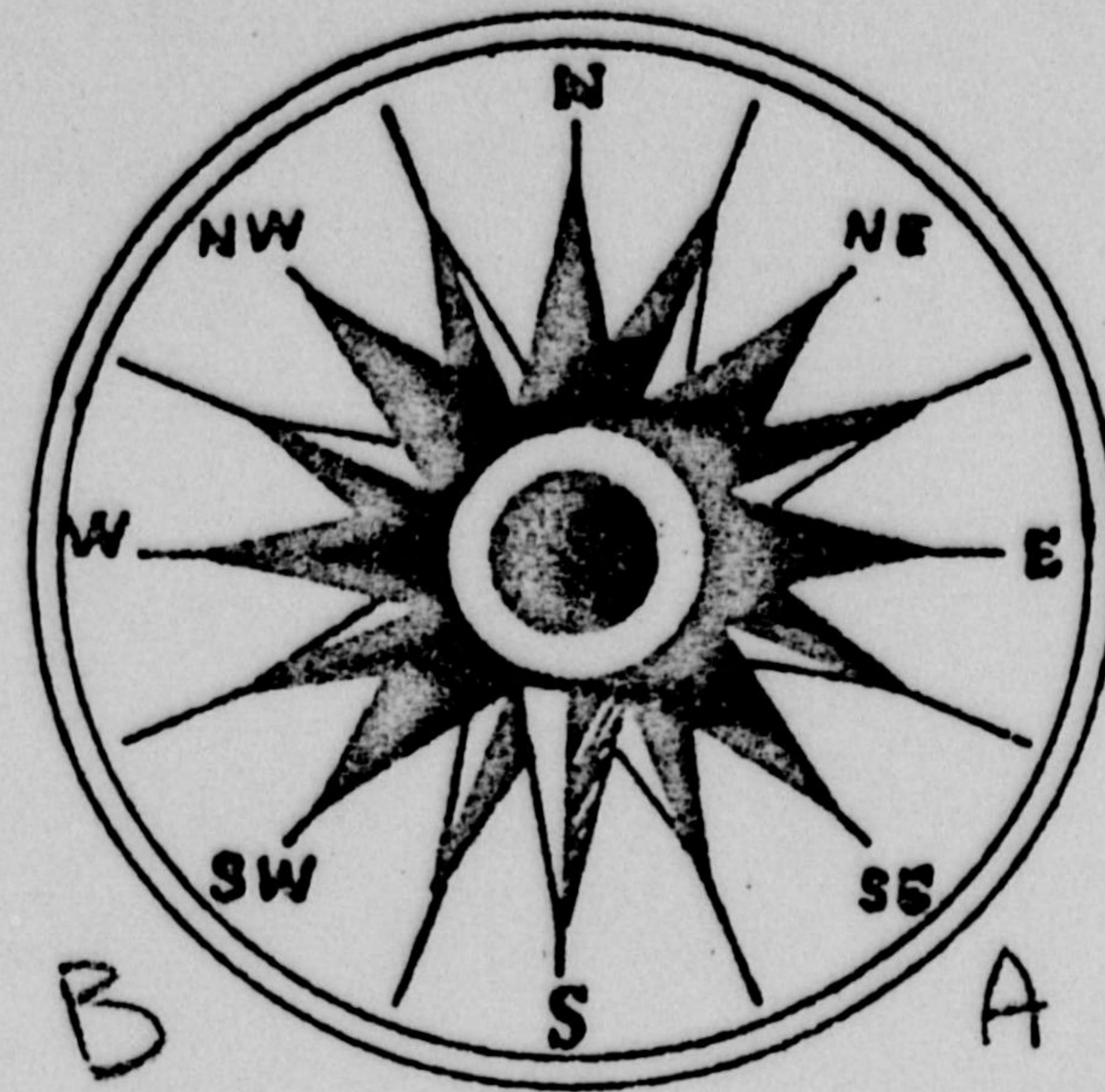
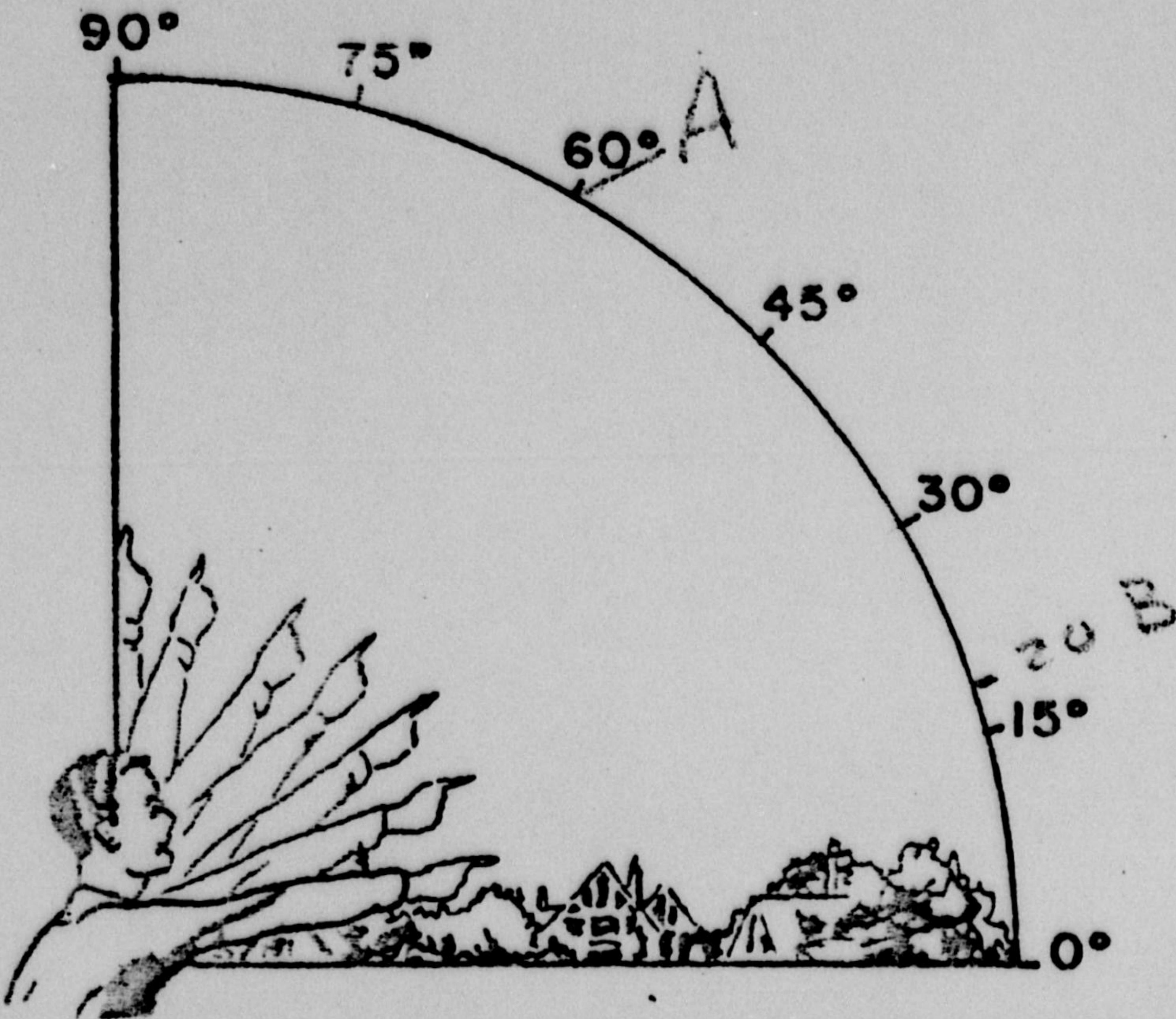
25. Did you observe the object through any of the following?

a. Eyeglasses	Yes	<input checked="" type="radio"/> No	e. Binoculars	Yes	<input type="radio"/> No
b. Sun glasses	Yes	<input checked="" type="radio"/> No	f. Telescope	Yes	<input type="radio"/> No
c. Windshield	<input checked="" type="radio"/> Yes	No	g. Theodolite	Yes	<input 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.

Comet

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.



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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	<i>Maj</i>	First Name	Middle Name
	<i>ASOB</i>		
ADDRESS	<i>New Carlisle</i>	City	Zone
			State
TELEPHONE NUMBER	<i>45344</i>	AGE	SEX
		<i>41</i>	<i>M</i>

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

*Maj. Elliott is a active duty Air Force
officer on duty in the SAC command
post.*

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

Day Month Year

New Carlisle, O.

4. *Sept. 6*

Franklin Dent

FTD (TDETR) RL
Wright-Patterson AFB, Ohio 45433
6 September 1966

New Carlisle, Ohio 45344

Dear

Reference your unidentified observation of 4 September 1966. The information which we have received is not sufficient for evaluation. Request you complete the attached FFD Form 164 and return it in the envelope provided.

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

Sincerely,

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

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CHART OF RECORD