

## PROJECT 10070 RECORD

1. DATE - TIME GROUP 15 Mar 67 15/0750Z	2. LOCATION SEBEKA, MINN
3. SOURCE Civilian	10. CONCLUSION Possible (AIRCRAFT)
4. NUMBER OF OBJECTS One	No data presented to indicate object could not have been an A/C.
5. LENGTH OF OBSERVATION 7 Minutes	11. BRIEF SUMMARY AND ANALYSIS Observer stated object was very large with many light of many colors. Observer stated the intire top had very bright lights of different colors, all around the bottom. Observer stated she lost contact with object when she turned and the object continued on.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE E - N	
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.

Aircraft (possible)

95CU  
46 $40^{\circ}$ N



15 MAR 6?

DEPARTMENT OF THE AIR FORCE  
HEADQUARTERS 29TH AIR DIVISION (ADC)  
DULUTH INTERNATIONAL AIRPORT  
DULUTH, MINNESOTA 55814

REPLY TO  
ATTN OF: 29 OIN

SUBJECT: Unidentified Flying Object Report

TO: Foreign Technology Division (TDETR)

1. On 13 April 1967, the attached UFO Report was received by this office from the 739th Radar Squadron, Wadena AFS, Minnesota 56487.
2. The 739th RADRON Intelligence Officer knew nothing of the report. An airman on duty in the Operations Section was unable to find any record of it.
3. This office is forwarding the report to FTD. No copy is being sent by this office to the University of Colorado. No further investigation will be conducted by this office unless requested by FTD.

FOR THE COMMANDER

*William B. Stoecker*

WILLIAM B. STOECKER, 1st Lt, USAF  
Asst Chief, Intelligence Division

1 Atch  
UFO Report, 9 pgs.

# U.S. AIR FORCE TECHNICAL INFORMATION SHEET

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes; and will be regarded as confidential material. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that, if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

15<sup>th</sup> March 1917  
Day Month Year

(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

## Additional Remarks

Additional Remarks: First arrival in the vicinity  
of the center was at the beginning  
right at intersection and about containing

5. Estimate how long you saw the object.

7  
— Hours — Minutes — Seconds

5.1 Circle one of the following to indicate how certain you are of your answer to Question 5.

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

6. What was the condition of the sky?

7. If you saw the object during DAYLIGHT, TWILIGHT, or DAWN, where was the SUN located at the object:

8. IF you saw the object at NIGHT, TWILIGHT, or DAWN, 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. Was the object brighter than the background of the sky?

(Circle One):

- a.  Yes
- b. No
- c. Don't remember

10. IF it was BRIGHTER THAN the sky background, was the brightness like that of an automobile headlight?

(Circle one): a. A mile or more away (a distant car)?  
 b. Several blocks away?  
 c. A block away?  
 d. Several yards away?  
 e. Other

*Very large object with many lights of many colors.*

11. Did the object:

(Circle One for ea question)

a. Appear to stand still at any time?	Yes	<input checked="" type="radio"/> No	Don't Know
b. Suddenly speed up and rush away at any time?	Yes	<input checked="" type="radio"/> No	Don't know
c. Break up into parts or explode?	Yes	<input checked="" type="radio"/> No	Don't Know
d. Give off smoke?	Yes	<input checked="" type="radio"/> No	Don't Know
e. Change brightness?	<input checked="" type="radio"/> Yes	No	Don't Know
f. Change shape?	Yes	<input checked="" type="radio"/> No	Don't Know
g. Flicker, throb, or pulsate?	<input checked="" type="radio"/> Yes	No	Don't Know

12. Did the object move behind something at anytime, particularly a cloud?

(Circle One): Yes  No Don't Know. IF you answered YES then tell what it moved behind

13. Did the object move in front of something at anytime, particularly a cloud?

(Circle One): Yes  No Don't Know. IF you answered YES, then tell what it moved in front of:

14. Did the object appear: (Circle One): a.  Solid, b. Transparent?  
 c. Don't Know

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

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

16. Tell in a few words the following things about the object.

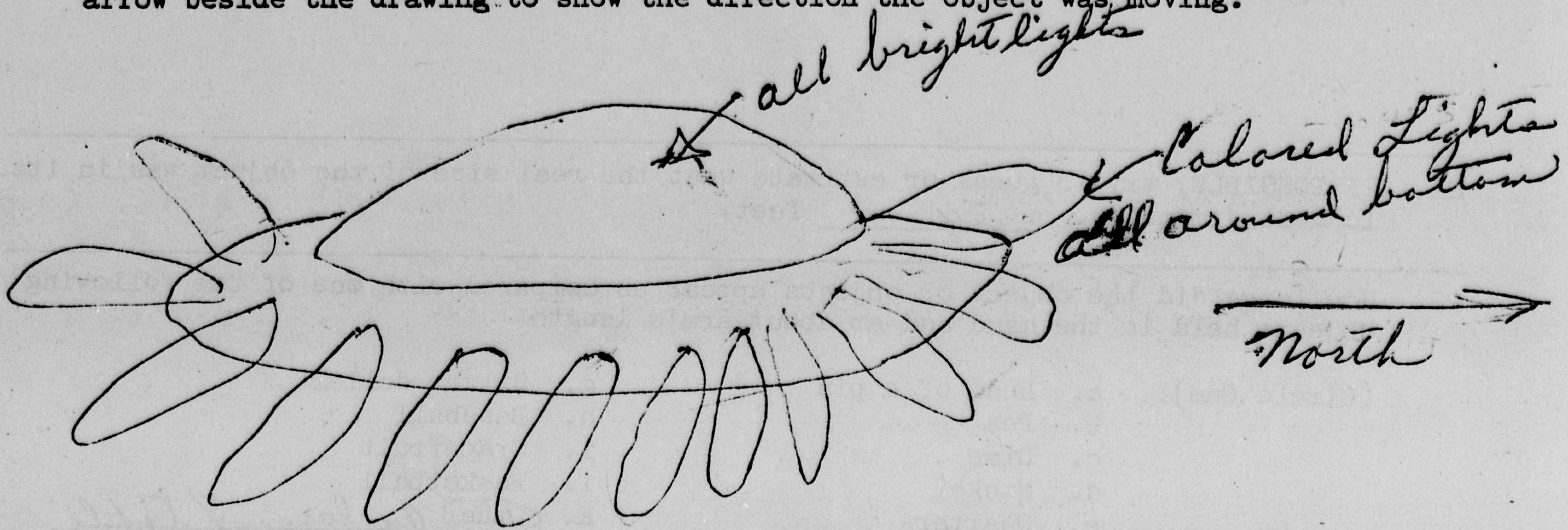
a. Sound

*Riding in the Automobile, no sound noticed*

b. Color

*Intense top, very bright light, Many lights of different colors, all around of the bottom*

17. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.



18. The edges of the object were:

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

e. Other \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

19. IF there was MORE THAN ONE object, than how many were there?

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

20. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

A. \_\_\_\_\_

B. No change in direction

21. IF POSSIBLE, try to guess or estimate what the real size of the object was in its longest dimension. 24 feet.

22. How large did the object or objects appear as compared with one of the following objects held in the hand and at about arm's length?

(Circle One):

a. Head of a pin	g. Silver dollar
b. Pea	h. Baseball
c. Dime	i. Grapefruit
d. Nickel	j. Basketball
e. Quarter	k. Other <u>as large as table</u>
f. Half Dollar	

22.1 (Circle One of the following to indicate how certain you are of your answer to Question 22.

a. Certain	c. Not very sure
b. <u>Fairly certain</u>	d. Uncertain

23. How did the object or objects disappear from view? I turned at intersection and lost count of it

24. In order that you can give as clear a picture as possible of what you saw, we would like for you to imagine that you could construct the object that you saw. Of what type material would you make it? How large would it be, and what shape would it have. Describe in your own words a common object or objects which when placed in the sky would give the same appearance as the object which you saw.

I would make it out of metal & Glass. About 2 times as wide as a car is long. Something like a Saucer with a cup upside down on it. It appeared something like a semi truck trailer.

25. Where were you located when you saw the object? (Circle One):

- Inside a building
- In a car
- Outdoors
- In an airplane
- At sea
- Other \_\_\_\_\_

26. Were you (Circle One)

- In the business section of a city?
- In the residential section of a city?
- In open countryside?
- Flying near an airfield?
- Flying over a city?
- Flying over open country?
- Other \_\_\_\_\_

27. What were you doing at the time you saw the object and how did you happen to notice it?

*I was driving home, and my lights kept going on and off, as well as the motor, for about a  $1\frac{1}{2}$  mile as I looked up at about a 30 - 45 degree angle and noticed the object.*

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

28.1 What direction were you moving? (Circle One)

- North
- Northeast
- East
- Southeast
- South
- Southwest
- West
- Northwest

28.2 How fast were you moving? 50 miles per hour.

28.3 Did you stop at any time while you were looking at the object?  
(Circle One) Yes  No

29. What direction were you looking when you first saw the object? (Circle One)

- North
- Northeast
- East
- Southeast
- South
- Southwest
- West
- Northwest

30. What direction were you looking when you last saw the object? (Circle One)

- North
- Northeast
- East
- Southeast
- South
- Southwest
- West
- Northwest

31. If you are familiar with bearing terms (angular direction) try to estimate the number of degrees the object was from true North and also the number of degrees it was upward from the horizon (elevation).

31.1 When it first appeared:

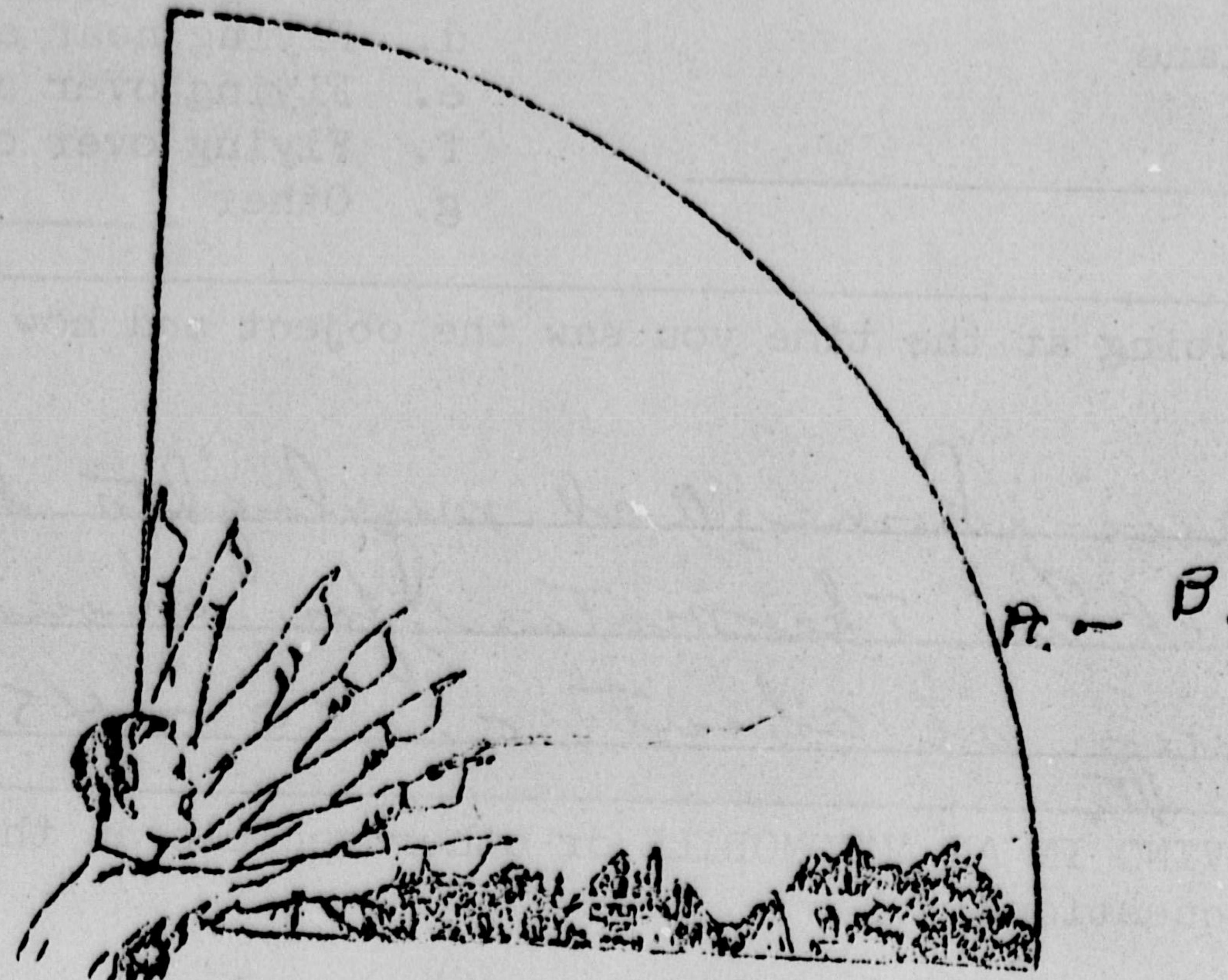
- From true North 0 degrees
- From horizon 30 - 45 degrees

31.2 When it disappeared

- From true North \_\_\_\_\_ degrees
- From horizon \_\_\_\_\_ degrees

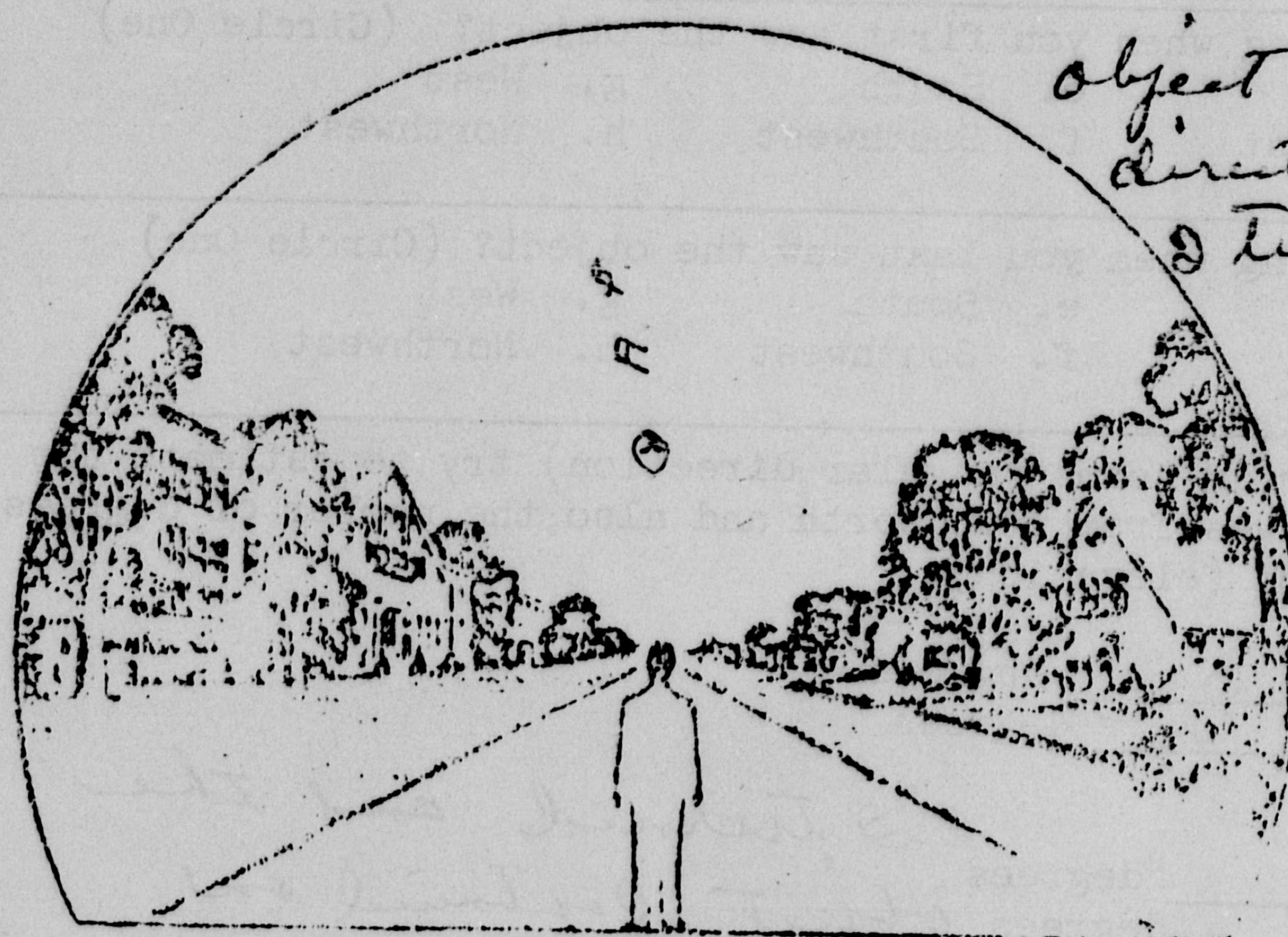
*I turned and the object continued on.*

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

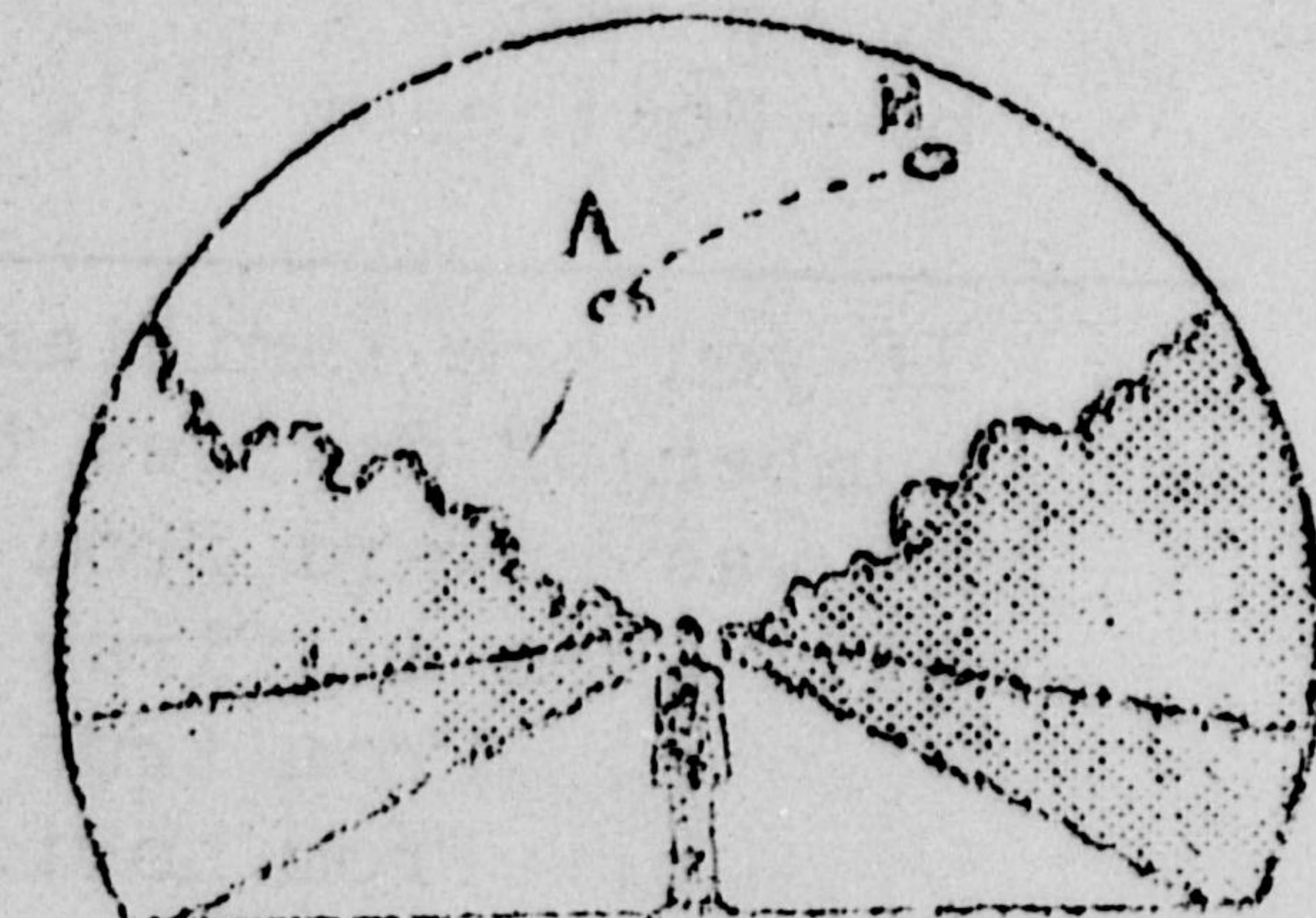


Pt. - B.

33. In the following larger sketch place an "A" at the position the object was when you first saw it, and a "B" at its position when you last saw it. Refer to smaller sketch as an example of how to complete the larger sketch.



object were traveling in same direction for approx  $1\frac{1}{2}$  mi until I turned.



34. What were the weather conditions at the time you saw the object?

34.1 CLOUDS (Circle One)

- a.  Clear Sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds
- e. Don't remember

34.2 WIND (Circle One)

- a. No Wind
- b. Slight breeze
- c. Strong wind
- d.  Don't remember

34.3 WEATHER (Circle One)

- a.  Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

34.4 TEMPERATURE (Circle One)

- a.  Cold
- b. Cool
- c. Warm
- d. Hot
- e. Don't Remember

35. When did you report to some official that you had seen the object?

16  
Day

March  
Month

67  
Year

36. Was anyone else with you at the time you saw the object?

(Circle One) Yes  No

36.1 IF you answered YES, did they see the object too?

(Circle One) Yes  No

36.2 Please list their names and addresses:

37. Was this the first time that you had seen an object or objects like this:

(Circle One) Yes  No

37.1 IF you answered NO, then when, where, and under what circumstances did you see other ones?

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

I have never seen anything similar to this

39. Do you think you can estimate the speed of the object?

(Circle One)  Yes No

IF you answered YES, then what speed would you estimate? 25 m.p.h.

40. Do you think you can estimate how far away from you the object was?

(Circle One)  Yes No

IF you answered YES, than how far away would you say it was? 1/2 mile feet.

41. Please give the following information about yourself.

NAME Last Name

First Name

Middle Name

ADDRESS Street

City

Zone

State

TELEPHONE NUMBER Station

What is your present job? Hostess at the Pine Cone Inn

Age 25 Sex Female

Please indicate any special educational training you have had.

a. Grade School \_\_\_\_\_  
 b. High School ✓  
 c. College \_\_\_\_\_  
 d. Post graduate \_\_\_\_\_

e. Technical school \_\_\_\_\_  
 (Type) \_\_\_\_\_  
 f. Other special training \_\_\_\_\_

42. Date you completed this questionnaire:

23  
Day

March  
Month

1967  
Year

## U.S. AIR FORCE TECHNICAL INFORMATION SHEET

## (SUMMARY DATA)

In order that your information may be filed and coded as accurately as possible, please use the following space to write out a short description of the event that you observed. You may repeat information that you have already given in the questionnaire, and add any further comments, statements, or sketches that you believe are important. Try to present the details of the observation in the order in which they occurred. Additional pages of the same size paper may be attached if they are needed.

NAME

(Please Print)

(Do not write in this Space)

SIGNATURE

CODE:

DATE

March 23, 1967

I was on my way home from work and driving north, my lights went out and on, & the motor kept dying out and on, looked up & seen the object going ahead of me. It traveled about the same speed I was going, until I turned right when I reached town and the object kept going on to the north.

U.S. AIR FORCE TECHNICAL INFORMATION SHEET  
(SUMMARY DATA)

In order that your information may be filed and coded as accurately as possible, please use the following space to write out a short description of the event that you observed. You may repeat information that you have already given in the questionnaire, and add any further comments, statements, or sketches that you believe are important. Try to present the details of the observation in the order in which they occurred. Additional pages of the same size paper may be attached if they are needed.

NAME [REDACTED]

(Do not write in this Space)

(Please Print)

SIGNATURE [REDACTED]

CODE:

DATE March 23, 1967

I was on my way home from work and driving North, my lights went out and on, & the motor kept dying out and on, looked up & seen the object going ahead of me. It traveled about the same speed I was going, until I turned right when I reached town and the object kept going on to the North.