PROJECT 10073 RECORD

1. DATE - TIME GROUP	2. LOCATION
12 Jun 67	Dayton, Ohio 3
3. SOURCE	**10. CONCLUSION**
Civilian	INSUFFICIENT DATA FOR EVALUATION Send form 161 to observer over 30 days ago, and not returned as of this date, sight re-evaluated when returned.
4. NUMBER OF OBJECTS	
1	
5. LENGTH OF OBSERVATION	**11. BRIEF SUMMARY AND ANALYSIS**
1 hour	S E E C A S E F I L E
6. TYPE OF OBSERVATION	
Ground Visual (BX)	
7. COURSE	
Southeast	
8. PHOTOS	
☐ Yes ☒ No	
9. PHYSICAL EVIDENCE	
☐ Yes ☒ No	

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

Insuff. Data 12 June 67

DEPARTMENT OF THE AIR FORCE
HEADQUARTERS FOREIGN TECHNOLOGY DIVISION (AFSC)
WRIGHT-PATTERSON AIR FORCE BASE, OHIO 45433

REPLY TO ATTN OF: TDET/UFO

SUBJECT: UFO Observation , 12 June 1967

JUN 21 1967

TO: Mis[redacted]
Dayton, Ohio 45424

Reference your unidentified observation. The information which we have received is not sufficient for a scientific evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided. Thank you for reporting your observation to the Air Force.

JAMES C. MANATT, Colonel, USAF
Director of Technology and Subsystems

1 Atch
FTD Form 164 w/envelope

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?

12 (Day) JUNE (Month) _____ (Year)

2. Time of day: 2130 (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 (City or Town) Ohio (State or County)

5. How long was object in sight? (Total Duration) 1 (Hours) _____ (Minutes) _____ (Seconds)

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

5.1 How was time in sight determined? estimated

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?

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 Change from Red to Green to 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) Moving very slowly

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? Area of WPAFB

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?

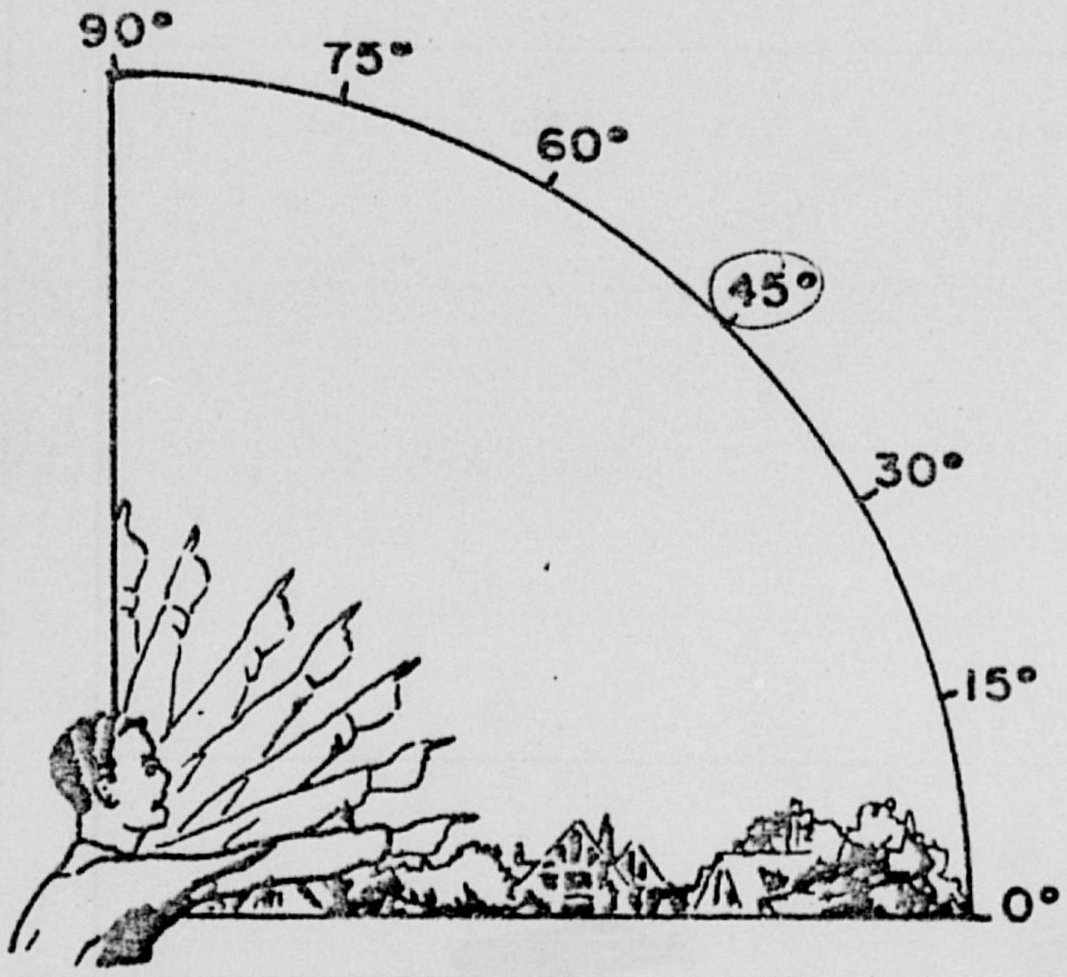
(Circle One) Yes No

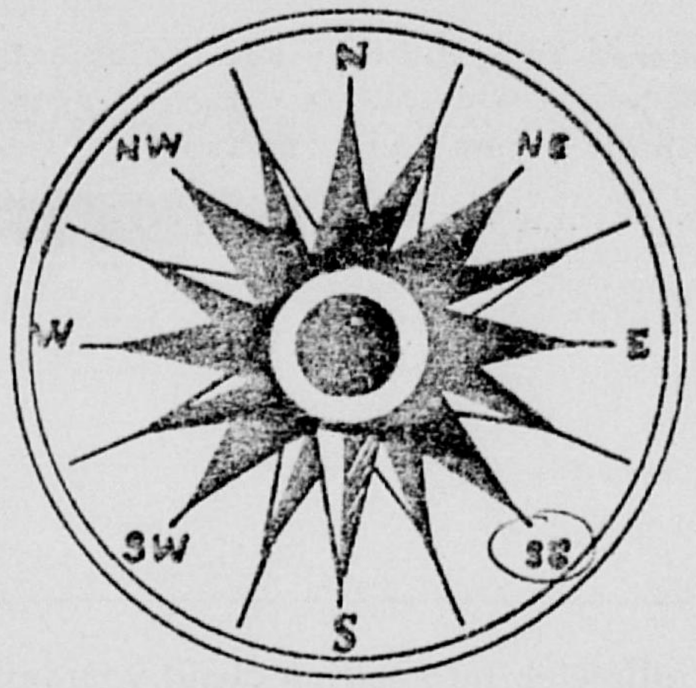
25. Did you observe the object through any of the following?

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.

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.

moving parallel to horizon
left to right

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:

Mr & Mrs [redacted]

32. Please give the following information about yourself:

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

ADDRESS _____ _____ _____ _____
Street City Zone State

TELEPHONE NUMBER [redacted] AGE 25 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? Lt. T. J VALORE

_____ _____ _____
Day Month Year

NOTE: 14 June 0200Z

Reference UFO REPORT TAKEN
2 days ago. UFO reported them
by [redacted]
a [redacted], DAYTON.

Same object seen by [redacted]
on 14 June at ~0200Z [redacted] Object was same
color and in same position in
sky as reported by Judy Haynes.

[redacted]
Dayton
[redacted]

45424

Duty Officer
S.R. Pechuan

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.

Second report on same object however first would provide no details
Third report received same object

[redacted] Dayton Ohio

45424

12 June 67

DEPARTMENT OF THE AIR FORCE
HEADQUARTERS FOREIGN TECHNOLOGY DIVISION (AFSC)
WRIGHT-PATTERSON AIR FORCE BASE, OHIO 45433

REPLY TO ATTN OF: TDET/UFO

SUBJECT: UFO Observation; 12 June 1967

JUN 21 1967

TO: [redacted]
Dayton, Ohio 45424

Reference your unidentified observation. The information which we have received is not sufficient for a scientific evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided. Thank you for reporting your observation to the Air Force.

JAMES C. MANATT, Colonel, USAF
Director of Technology and Subsystems

1 Atch
FTD Form 164 w/envelope

[redacted] TDET/UFO OFFICIAL FILE COPY

14 June 67

DEPARTMENT OF THE AIR FORCE
HEADQUARTERS FOREIGN TECHNOLOGY DIVISION (AFSC)
WRIGHT-PATTERSON AIR FORCE BASE, OHIO 45433

REPLY TO ATTN OF: TDET/UFO

SUBJECT: UFO Observation, 14 June 1967

JUN 2 1 1967

TO: Miss [redacted] Court
[redacted]
Dayton, Ohio 45424

Reference your unidentified observation. The information which we have received is not sufficient for a scientific evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided. Thank you for reporting your observation to the Air Force.

JAMES C. MANATT, Colonel, USAF
Director of Technology and Subsystems

1 Atch
FTD Form 164 w/envelope

TDET/ufo official file cy

PROJECT 100/3 RECORD

1. DATE - TIME GROUP	2. LOCATION
12 June 67 13/0430Z	Dayton, Ohio
3. SOURCE	**10. CONCLUSION**
Civilian	ASTRO (Mars) ✓
4. NUMBER OF OBJECTS	Mars was on an azimuth of 223 degrees, elevation of 30 degrees at time of sighting.
1	
5. LENGTH OF OBSERVATION	**11. BRIEF SUMMARY AND ANALYSIS**
2 hours, 10 minutes	Observer stated object resembled Venus in early evening. Object had a blue-white to reddish and even a greenish color. Object was fuzzy and appeared to have a pulsateing motion to it.
6. TYPE OF OBSERVATION	
Ground Visual (BX-TX)	
7. COURSE	
South	
8. PHOTOS	
☐ Yes ☒ No	
9. PHYSICAL EVIDENCE	
☐ Yes ☒ No	

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

Astro (MARS) Az 223 deg. El. 30 deg.
-3

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?

12 (Day) 6 (Month) 67 (Year)

2. Time of day: 11 (Hour) 30 (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) 2 (Hours) 10 (Minutes) that I want to be (Seconds)

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

5.1 How was time in sight determined? Electric wrist watch periodically set to WWV

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:

Venus in early evening this time of year

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?

NOT THAT NIGHT

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 Blue white to reddish to greenish

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?
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

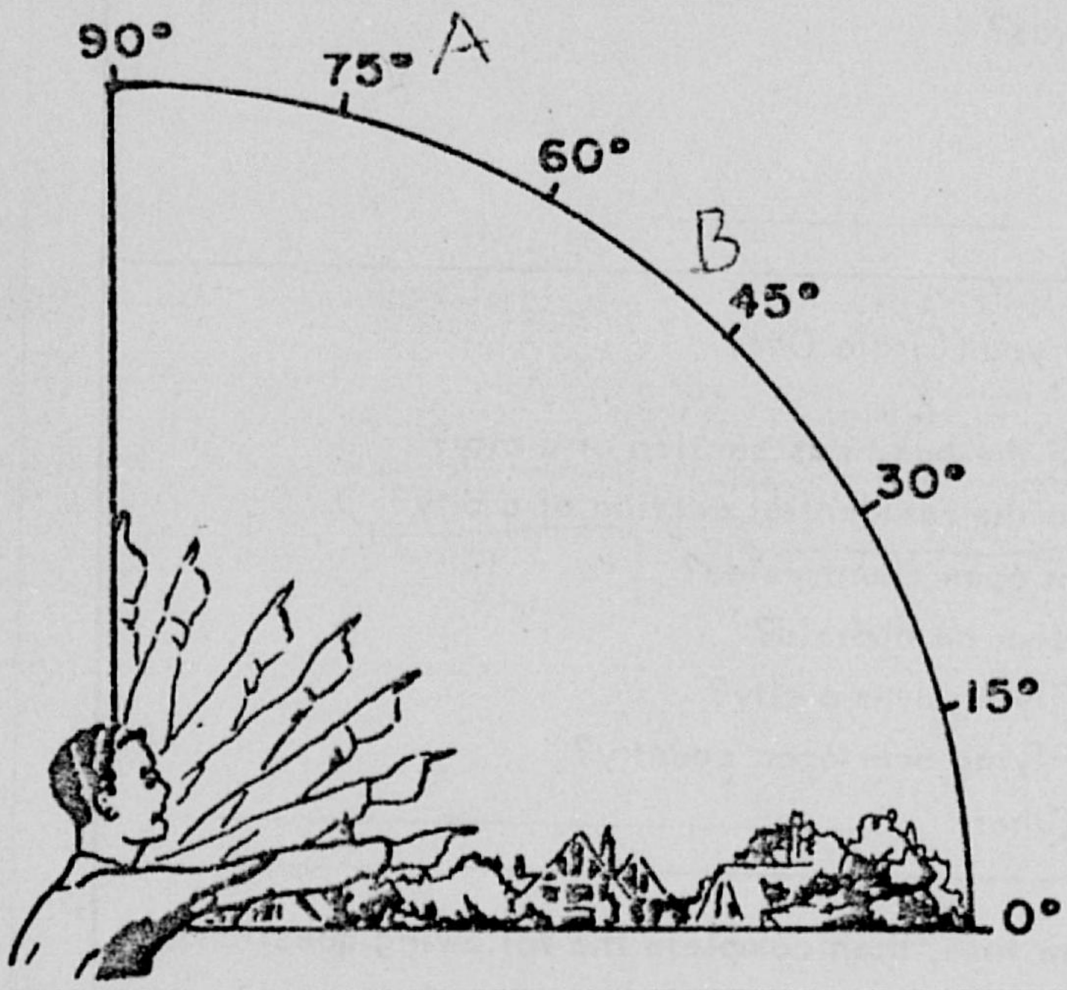
25. Did you observe the object through any of the following?

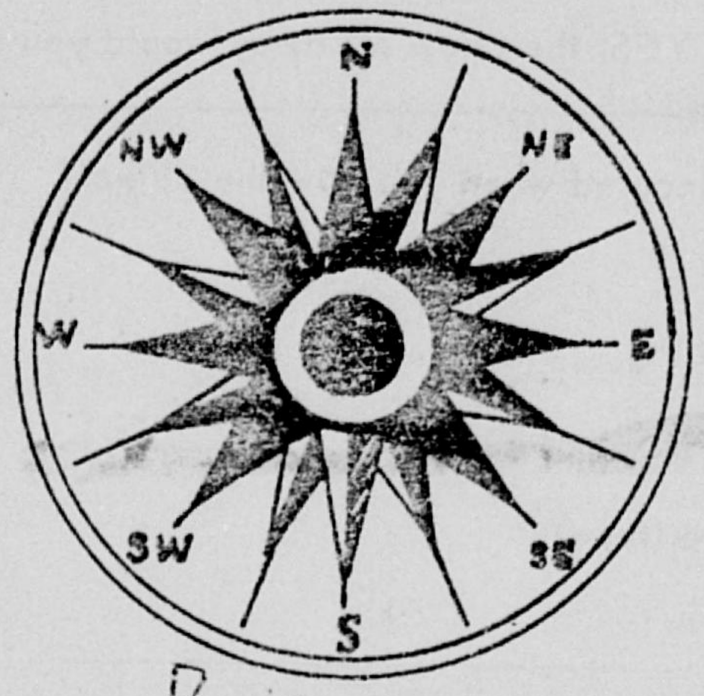
a. Eyeglasses	Yes	No	e. Binoculars	(Yes)	No
b. Sun glasses	Yes	No	f. Telescope	Yes	No
c. Windshield	Yes	No	g. Theodolite	Yes	No
d. Window glass	Yes	No	h. Other _____		

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.

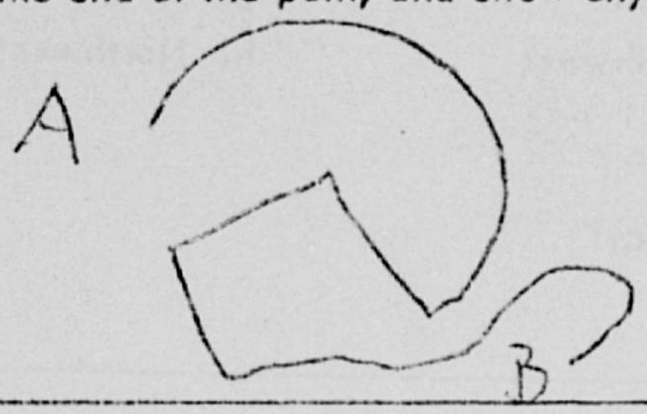
Seems but for the color changes a moment also at that time of night seems is in the western sky and not visible from my back yard because of trees.

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.



This is only part of the movement observed it would be impossible to diagram all motion in this length of sighting

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.
6/54 Columbus, Ohio

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 addr[redacted]
[redacted] Dayton, Ohio
[redacted] Dayton, Ohio

32. Please give the following information about yourself:

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

ADDRESS [redacted] (Street) DAYTON (City) 45406 (Zone) OHIO (State)

TELEPHONE NUMBER [redacted] AGE 43 SEX M

Indicate any additional information about yourself, including any special experience, which might be pertinent.
FO detail 217 FA Bn C Battery 44th Div-
ETO

STUDENT PILOT APPROX 150 HRS LIGHT
AIRCRAFT

AMATUER RADIO GENERAL CLASS W8WJL

33. When and to whom did you report that you had seen the object?
12 (Day) 6 (Month) 67 (Year) OD at WPAFB
don't remember his name

34. Date you completed this questionnaire: 6 (Day) 22 (Month) 67 (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.

This object or a similar one was also sighted by me on the three nights following this sighting in the course of the alley dates 6/13/67, 6/14/67 and 6/15/67, on the 14th we were visiting at the residence of Mr. & Mrs. [redacted] Gulfport, we watched it also from binoculars for about an hour, this evening after a display it disappeared into the westerly alley at great speed. Time about 9:05 to 10:15 P.M.

J. A. W.

6/22/67 Object again sighted about 11:20 P.M. DAY-EST Same segment of alley - same erratic motion - observed with 60 power refracting telescope on tripod at 60 power no definate shape except ◇ like or but fuzzy - seemed to be red & green not distinct seems to move in a pulsating motion or in bursts, no noise, no contrail, alley clear, ~~moon~~ moon at 50° approx at 12:40 A.M. 6/23/67 when I ceased to observe & went to bed. Object was still in alley at that time.

J. A. W.

13 June 67

DEPARTMENT OF THE AIR FORCE
HEADQUARTERS FOREIGN TECHNOLOGY DIVISION (AFSC)
WRIGHT-PATTERSON AIR FORCE BASE, OHIO 45433

REPLY TO ATTN OF: TDET/UFO

SUBJECT: UFO Observation, 13 June 1967

JUN 21 1967

TO: Mr. [redacted]
Dayton, Ohio 45406

Reference your unidentified observation. The information which we have received is not sufficient for a scientific evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided. Thank you for reporting your observation to the Air Force.

JAMES C. MANATT, Colonel, USAF
Director of Technology and Subsystems

1 Atch
FTD Form 164 w/envelope

TDET/UFO OFFICIAL FILE CY

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?

13 (Day) JUNE (Month) 1967 (Year)

2. Time of day: 0025 (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 (City or Town) Ohio (State or County)

5. How long was object in sight? (Total Duration) _____ (Hours) 45 (Minutes) _____ (Seconds)

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

5.1 How was time in sight determined? estimated

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.

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:

~~Second mag~~ As bright as 1st Mag 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?

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?

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? Moves in sports

(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?

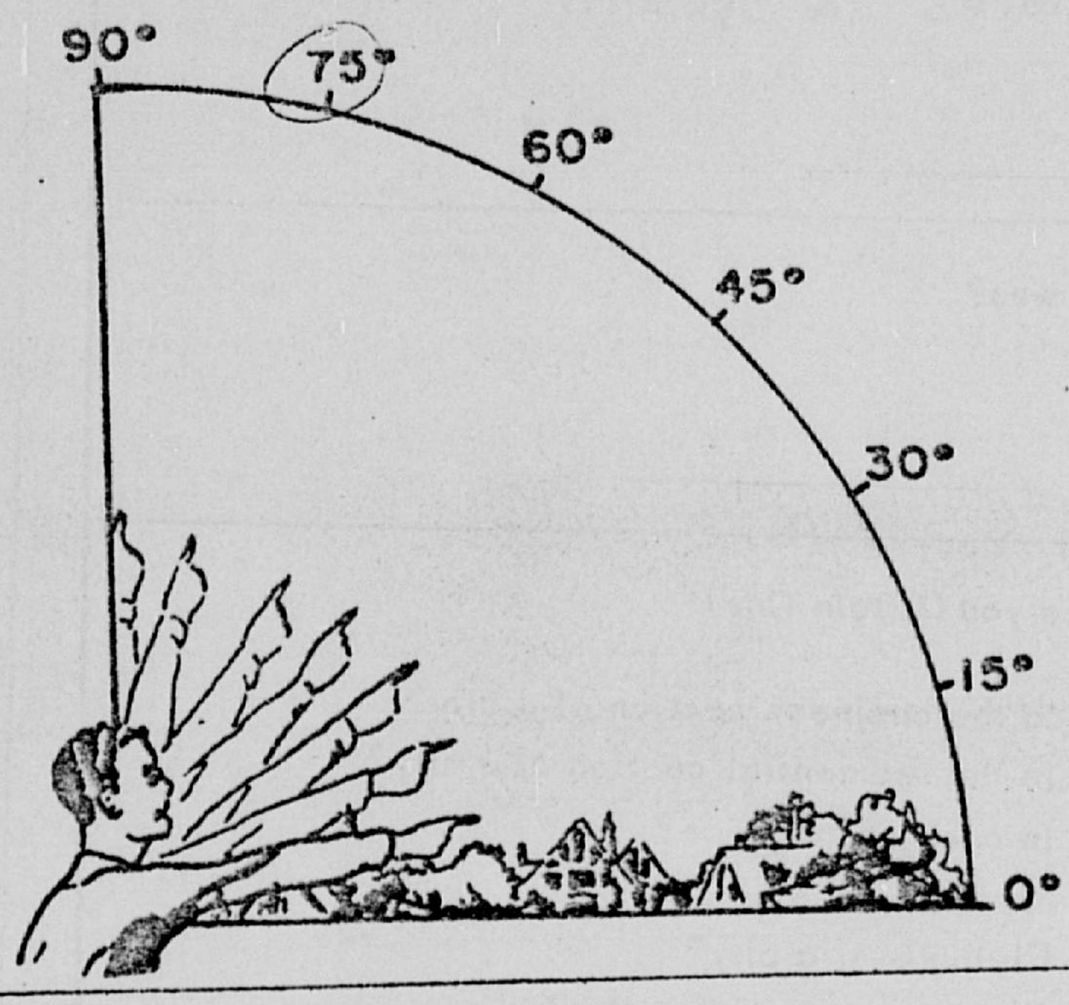
(Circle One) Yes No

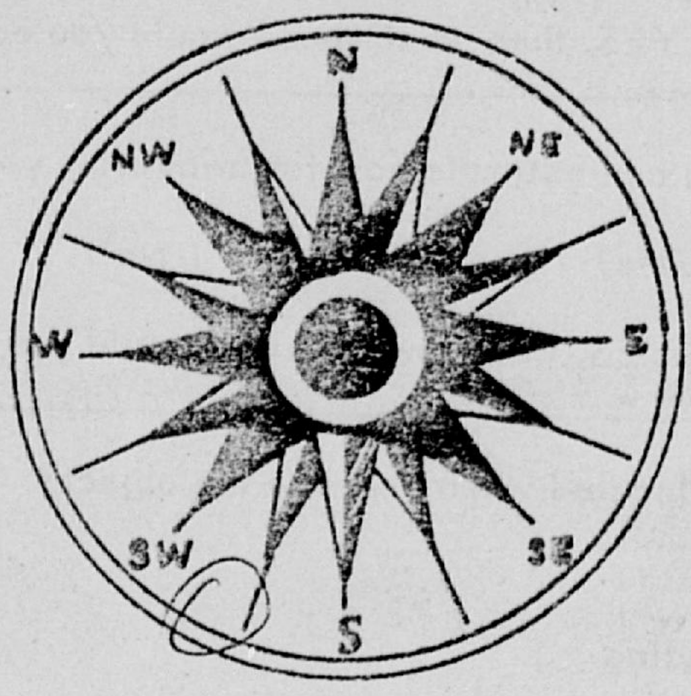
25. Did you observe the object through any of the following?

a. Eyeglasses	Yes	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.

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.

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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 [redacted] Middle Name

ADDRESS [redacted] Street 45406 City Zone State

TELEPHONE NUMBER [redacted] AGE 43 SEX Male

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

Extremely intelligent individual (MD) seem to know what he was talking about

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

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.

PROJECT 10073 RECORD

[illegible] TIME GROUP [illegible] Jun 67 17/0430Z	2. LOCATION Dayton, Ohio (2 Witnesses)
[illegible] SOURCE Civilian	10. CONCLUSION SATELLITE (Echo I) ✓ Ast
4. NUMBER OF OBJECTS 1	ECHO I was passing South of Dayton at 0339Z (1139L) on a NE heading at time of sighting.
5. LENGTH OF OBSERVATION 15-20 minutes	11. BRIEF SUMMARY AND ANALYSIS Observer stated that the object appeared to be a light. Object was compared in light brightness to that of a planet. Object disappeared or went behind clouds. Object had no distinct sound of its own. Color: Greenish-yellow compared to moon and planets.
6. TYPE OF OBSERVATION Ground Visual	
7. COURSE SE - NE	
8. PHOTOS [illegible] Yes X No	
PHYSICAL EVIDENCE [illegible] Yes X No	

FORM [illegible] OBSOLETE Previous editions of this form may be used.

Satellite (Echo I)
Echo I was passing south of Dayton at 0339 ± (1139Z) making heading

16 June 67
17/0430Z
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) _____ (Month) _____ (Year)

2. Time of day: 23 (Hour) 30 (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?

Greenwich — St. Johns Ave., Dayton

Nearest Postal Address / City or Town / State or County

5. How long was object in sight? (Total Duration) _____ Hours 15-20 Minutes _____ Seconds

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

5.1 How was time in sight determined? WATCH

5.2 Was object in sight continuously? Yes X 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
b. Transparent
c. Vapor
d. As a light
e. Don't remember

Something vague behind the light.

11. If it appeared as a light, was it brighter than the brightest ~~stars~~ planets? *(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: lighted balloon

(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? Vapor trail	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. Faded or went behind clouds

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

b. Color ~~W~~ Greenish - yellow compared to moon + planets

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?

About same size as 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? 75° in 15 min.

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

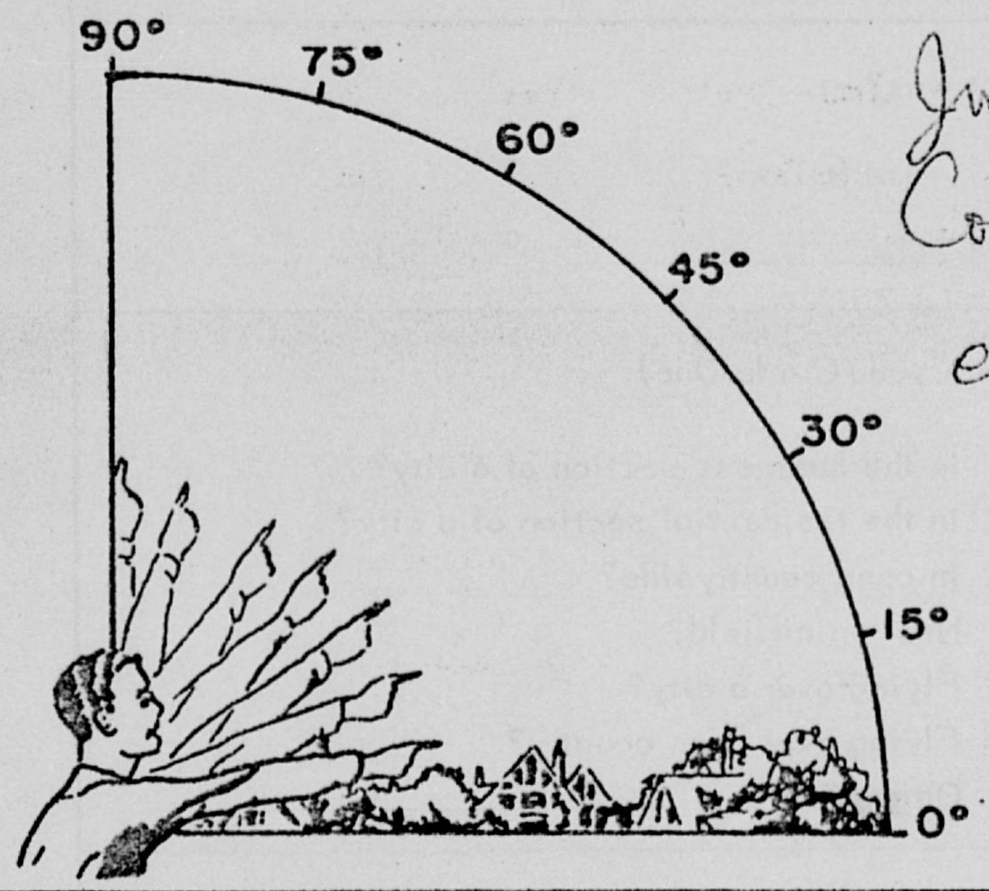
25. Did you observe the object through any of the following?

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 _____		

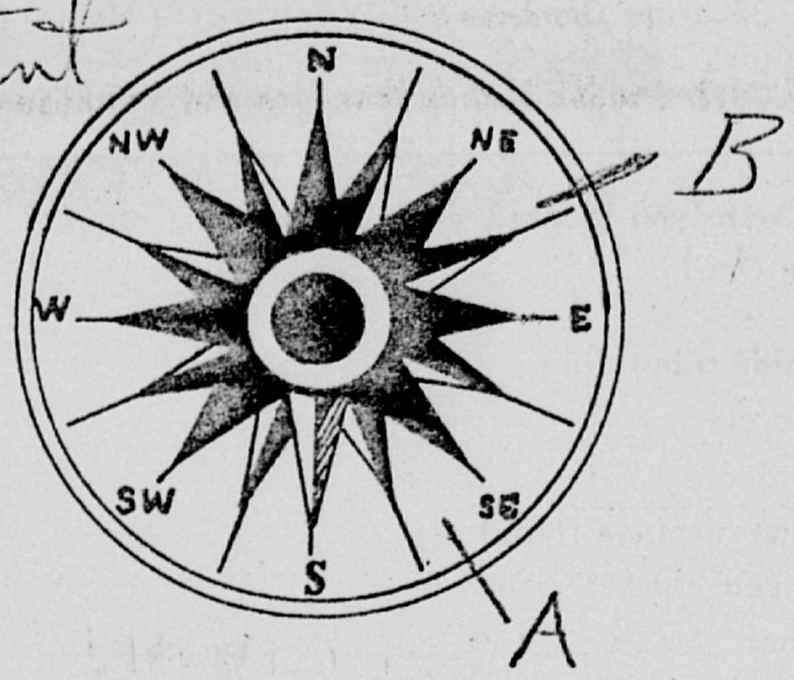
26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

Lighted balloon

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.



Just below moon, Constant elev.



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] _____
Last Name First Name Middle Name

ADDRESS [redacted] [redacted] DAYTON
Street City Zone State 45406

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?

16 June 67
Day Month Year

SDO — FTD Maj Dolan

ETR

Satellite (Echo I) Echo I was passing south of Dayton at 0339Z (1139L) on ENE heading

16 June 67
17/0445Z
Klayton, 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) Jun (Month) 67 (Year)

2. Time of day: 11 (Hour) 45 (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?

Home (Nearest Postal Address) _____ (City or Town) _____ (State or County)

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

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

5.1 How was time in sight determined? Watch

5.2 Was object in sight continuously? Yes X No ____

6. What was the condition of the sky?

DAY
a. Bright
b. Cloudy

NIGHT
a. Bright
b. Cloudy

LITTLE 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

With a tail

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. Disappeared behind clouds

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

b. Color Same as bright 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?

Same size as north star.

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? Faster than WP planes.

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

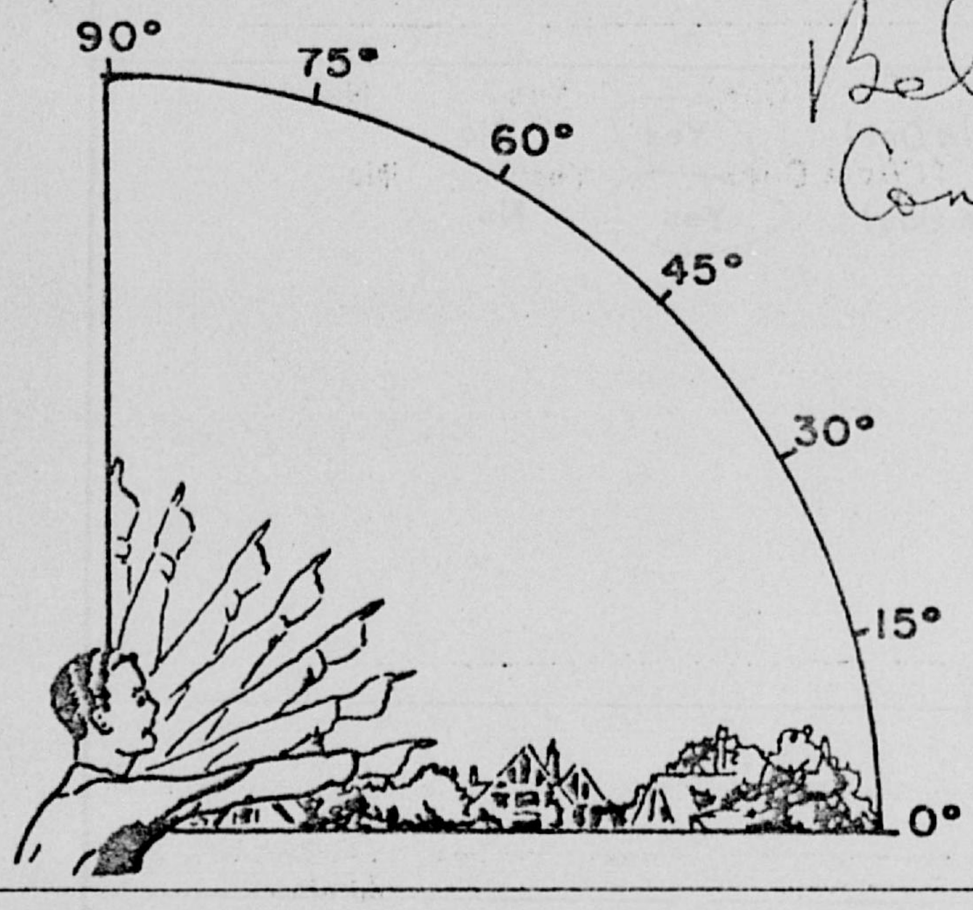
25. Did you observe the object through any of the following?

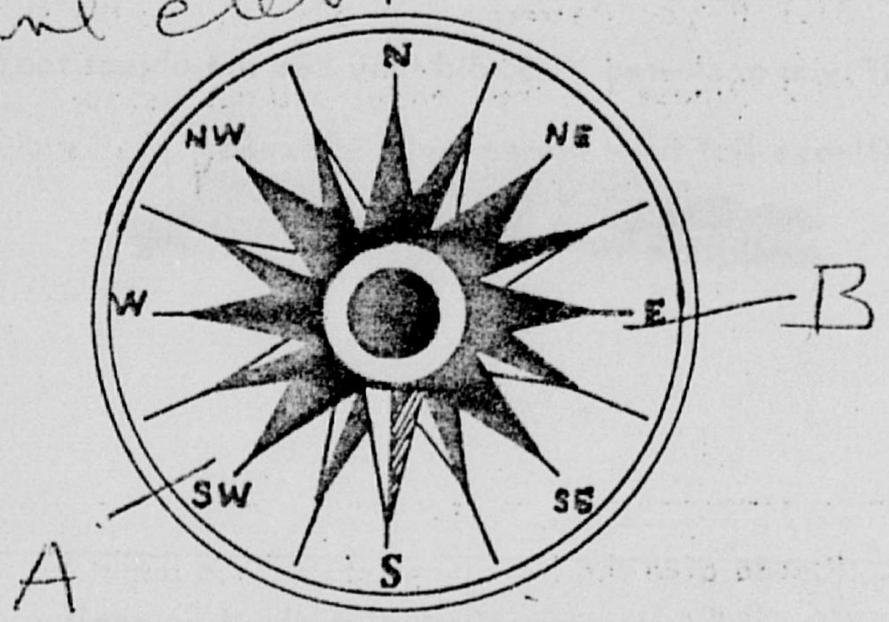
a. Eyeglasses	Yes	No	e. Binoculars	(Yes)	No
b. Sun glasses	Yes	No	f. Telescope	Yes	No
c. Windshield	Yes	No	g. Theodolite	Yes	No
d. Window glass	Yes	No	h. Other _____		

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.

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.

Below moon somewhat.
Constant elev.





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.
Same location. 13 and 15 June 67.

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]

32. Please give the following information about yourself:

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

[redacted]
ADDRESS _____ DAYTON 45424
Street City Zone State

TELEPHONE NUMBER _____ AGE _____ 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?

_____ _____ _____
Day Month Year