PROJECT 10073 RECORD

1. DATE - TIME GROUP	2. LOCATION
30	Dayton, Ohio

3. SOURCE	10. CONCLUSION
Civilian	SATELLITE (Echo II, ✓ Jrd Echo II was over New England on a [illegible] heading [illegible] sighting.
4. NUMBER OF OBJECTS 1	
5. LENGTH OF OBSERVATION 4 minutes	11. BRIEF SUMMARY AND ANALYSIS Observer stated object was a [illegible]ish white light, [illegible] evening star. Observer stated while talking to the observer on the phone, she stated her husband observed [illegible] at 2329 EDST. Object was reported as some type of [illegible] observer, the description was the same as the first [illegible] also.
6. TYPE OF OBSERVATION Ground Visual (BX)	
7. COURSE SE	
8. PHOTOS ☐ Yes ☒ No	
9. PHYSICAL EVIDENCE ☐ Yes ☒ No	

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

Check satellite

satellite (Echo II)

Echo II over New England on 30 Jun 67

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?

30 (Day) Jun (Month) 67 (Year)

2. Time of day: 23 (Hour) 00 (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) 0 (Hours) 4 (Minutes) 00 (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	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FTD FORM OCT 62 164 This form supersedes FTD 164, Jul 61, which is obsolete.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:

Blue Bright - like Evening 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? Yes; Over the horizon

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

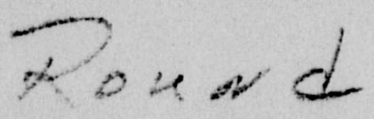
b. Color Bright Bluish White

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?

Would not cover much 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 ? Quite a distance,

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

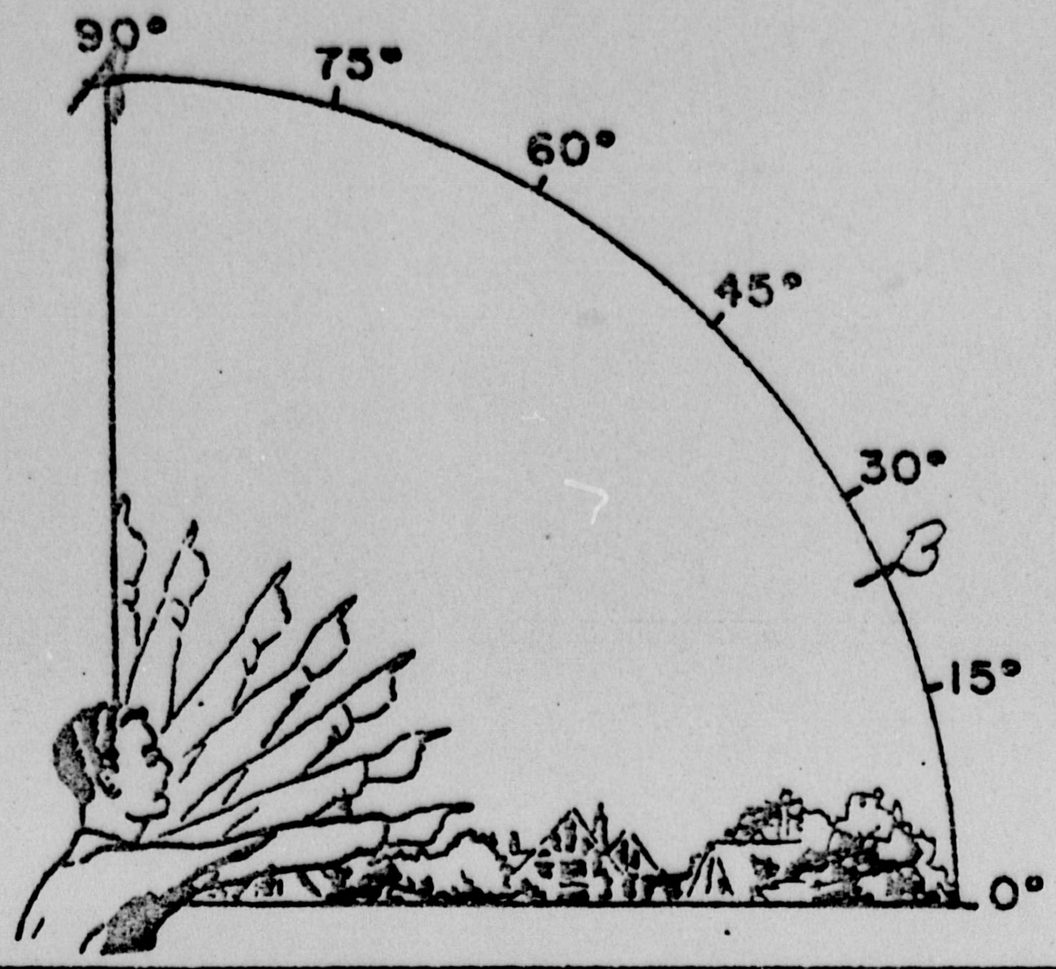
25. Did you observe the object through any of the following?

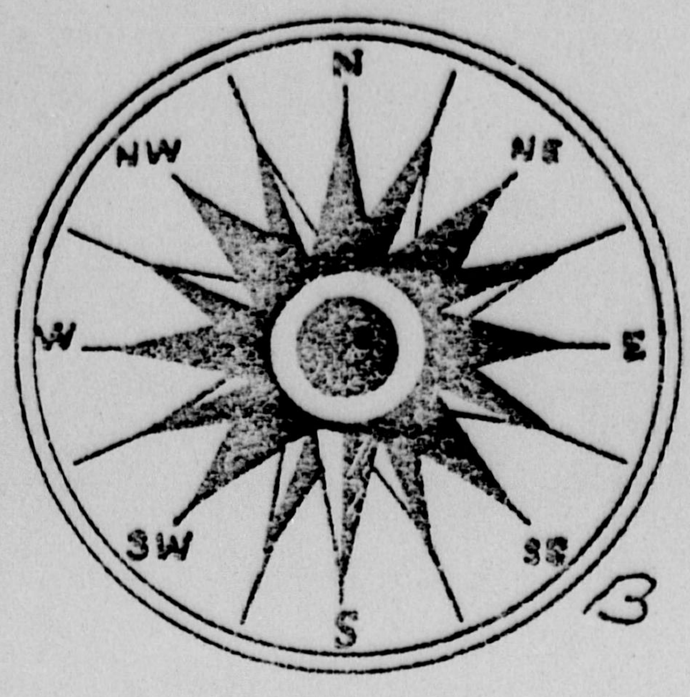
a. Eyeglasses	Yes	No	e. Binoculars	(Yes)	No
b. Sun glasses	Yes	No	f. Telescope	Yes	No
c. Windshield	Yes	No	g. Theodolite	Yes	No
d. Window glass	Yes	No	h. Other _____		

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.

Dont know

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 object
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.

Yes, last Sept 1966 at about 2205 EST

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 [redacted]

[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) 45414 (Zone) Ohio (State)

TELEPHONE NUMBER [redacted] AGE _____ SEX Female.

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

None especially

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

30 (Day) June (Month) 1967 (Year)

Major R.E. Brown DO ETD

34. Date you completed this questionnaire: 30 (Day) Jun (Month) 1967 (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.

While talking to the person on the telephone, she reported a second sighting by her husband at 2329 hrs EDST. Object was reported as same type and description as the first one.

Mary as Informer

PROJECT 10173 RECORD

1. DATE - TIME GROUP

2/0352Z

2. LOCATION

Dayton, Ohio

3. SOURCE

Civilian

4. NUMBER OF OBJECTS

2

5. LENGTH OF OBSERVATION

5 minutes

6. TYPE OF OBSERVATION

Ground Visual

7. COURSE

ESE

8. PHOTOS

☐ Yes
☒ No

9. PHYSICAL EVIDENCE

☐ Yes
☒ No

10. CONCLUSION

Possible ~~(AIRCRAFT)~~

No data presented to indicate object could not have been aircraft.

11. BRIEF SUMMARY AND ANALYSIS

Object was similar to a flourescent light. Bright white col... The two objects stayed together for a while and then separated and then lost contact with one of them

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

A/C (possible)

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?

1 (Day) JULY (Month) 1967 (Year)

2. Time of day: 1123 (Hour) 55 (Minutes) LOCAL DAYTON

(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 P[redacted] Address) DAYTON (City or Town) OHIO 4543[illegible] (State or County)

5. How long was object in sight? (Total Duration) 00 (Hours) 05 (Minutes) 00 (Seconds)

(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 ✓ No ____

6. What was the condition of the sky?

DAY
a. Bright
b. Cloudy

(NIGHT)
(a. Bright) CLEAR NIGHT
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

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:

FLOURSCENT LIGHT IS SIMILAR

12. The edges of the object were:

(*Circle One*): a. Fuzzy or blurred then
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 No Sound

b. Color Bright - 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? All Would Be Covered

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.

Just Round

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? ½ mile from WPAFB
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

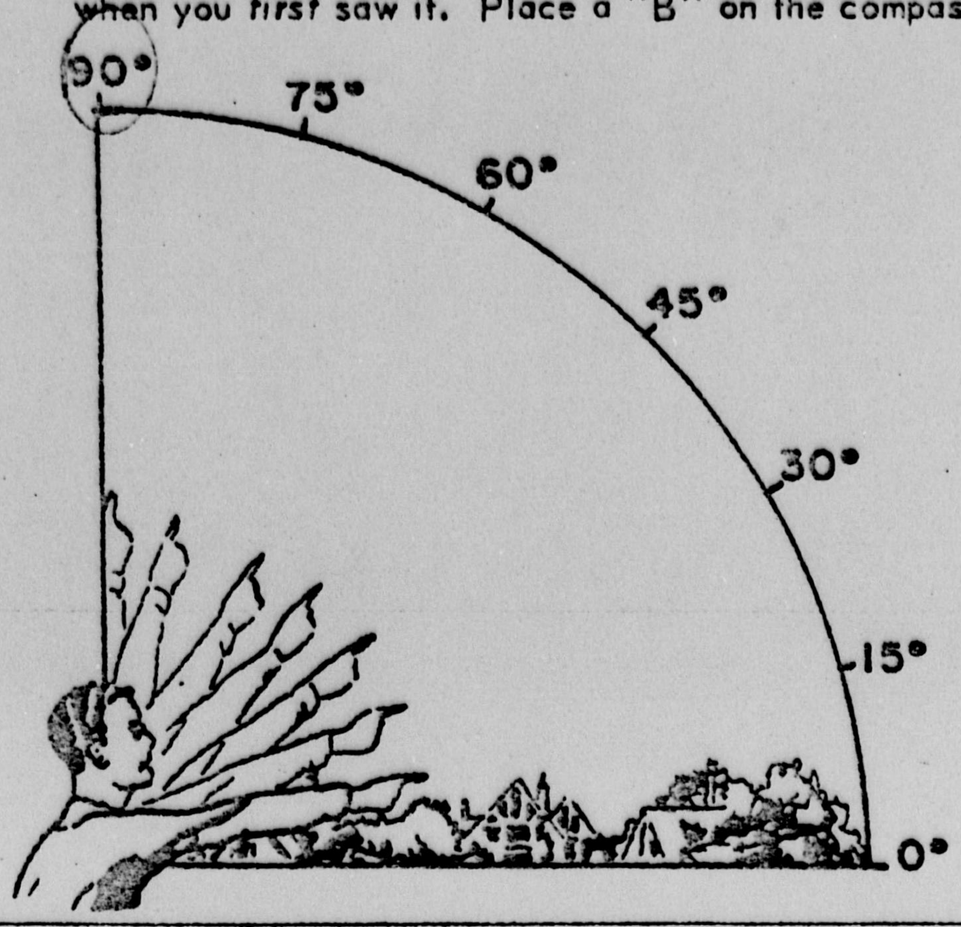
25. Did you observe the object through any of the following?

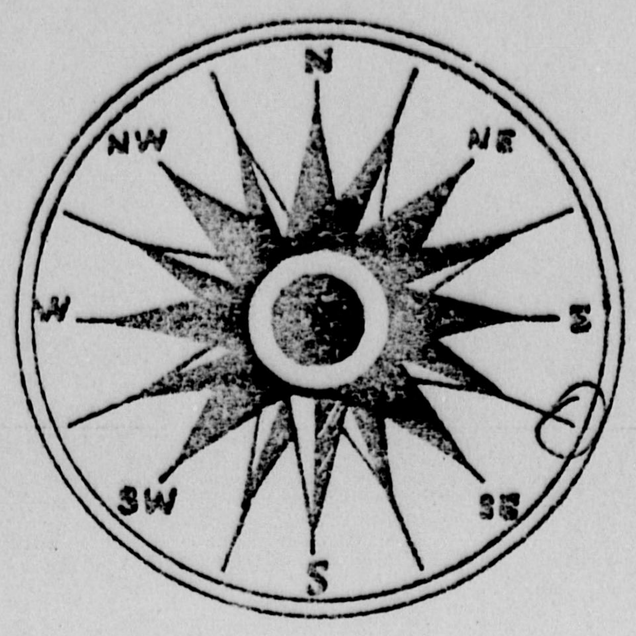
a. Eyeglasses	Yes	(No)	e. Binoculars	Yes	(No)
b. Sun glasses	Yes	(No)	f. Telescope	Yes	(No)
c. Windshield	Yes	(No)	g. Theodolite	Yes	(No)
d. Window glass	Yes	(No)	h. Other _____		

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.

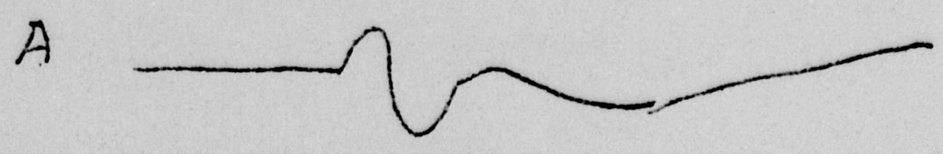
A STAR

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? 2

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

The 2 objects stayed together for a while and then separated. I lost track of the one object.

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: [redacted] FATHER

32. Please give the following information about yourself:

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

ADDRESS [redacted] DAYTON OHIO 45431 (Street / City / Zone / State)

TELEPHONE NUMBER [redacted] AGE 17 SEX MALE

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

NONE

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

2 JULY 1961 (Day / Month / Year)

34. Date you completed this questionnaire: 2 (Day) JULY (Month) 1967 (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.

25-31/95

PROJECT 10070 RECORD

1. [illegible] TIME GROUP [illegible] 3/ [illegible]	2. LOCATION De[illegible], Ohio
3. SOURCE [illegible]	10. CONCLUSION [illegible] ✓ JTB Very prob.
4. NUMBER OF OBJECTS 1	Venus via ex. [illegible] at 202 degrees, elevation [illegible] degrees to climb [illegible].
5. LENGTH OF OBSERVATION 1 hour, 30 minutes	11. BRIEF SUMMARY AND ANALYSIS Object appeared as a bright [illegible] light. Light changed to a red-yellow. Object appeared and disappeared off and on for one hour, 30 minutes. Each time it appeared, object was in a different location.
6. TYPE OF OBSERVATION Ground Visual	
7. COURSE [illegible]	
8. PHOTOS ☐ Yes ☒ No	
9. PHYSICAL EVIDENCE ☐ Yes ☒ No	

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

d: TDO/VENUS/

VENUS on Az of 282 deg
at El of 8 deg

2 July

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

REPLY TO ATTN OF TDET/UFO

18 JUL 1967

SUBJECT UFO Observation

TO [redacted]
Dayton, Ohio

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

MEMO FOR THE RECORD: 3 July 67

Received call from a Mrs. [redacted] St., Dayton, Ohio. She call to report a round circle of white light that was seen in her neighborhood. The white light was seen for over one hour. She was informed that a form would be sent for her completion. She agreed to complete the form and return information on her sighting.

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

REPLY TO ATTN OF: TDET/UFO

13 JUL 1967

SUBJECT: UFO Observation

TO: Mrs. [redacted]
[redacted] Street
Dayton, Ohio

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?

2 (Day) 7 (Month) 1967. (Year)

2. Time of day: 10 (Hour) 15 (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] St (Nearest Postal Address) Dayton (City or Town) Ohio (State or County)

5. How long was object in sight? (Total Duration) off and on for 1 (Hours) 30 (Minutes) _____ (Seconds)

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

5.1 How was time in sight determined? By a Clock

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 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 with a light all the way around it.
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:

North 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?

Yes - It appeared & disappeared off & on for 1 hr & 30 min
Each time it reappeared it was in a different location

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 So far away to hear.

b. Color Bright white at first then changed to reddish-yellow

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 _____

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?

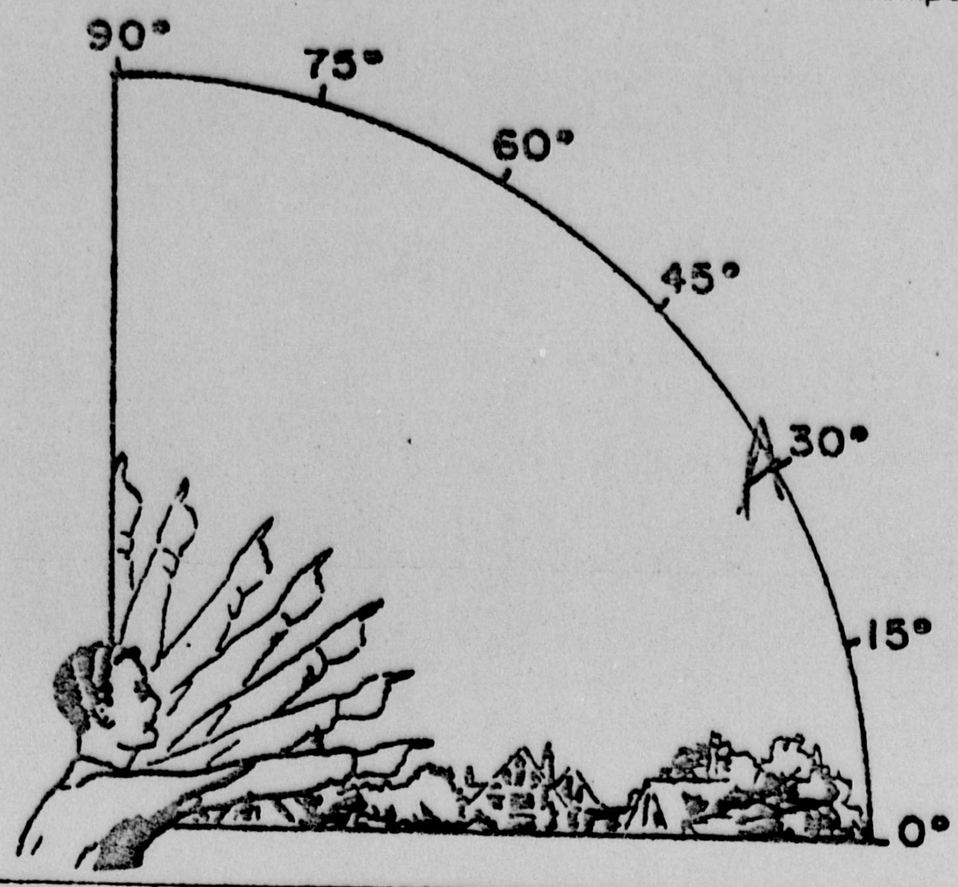
(Circle One) Yes No

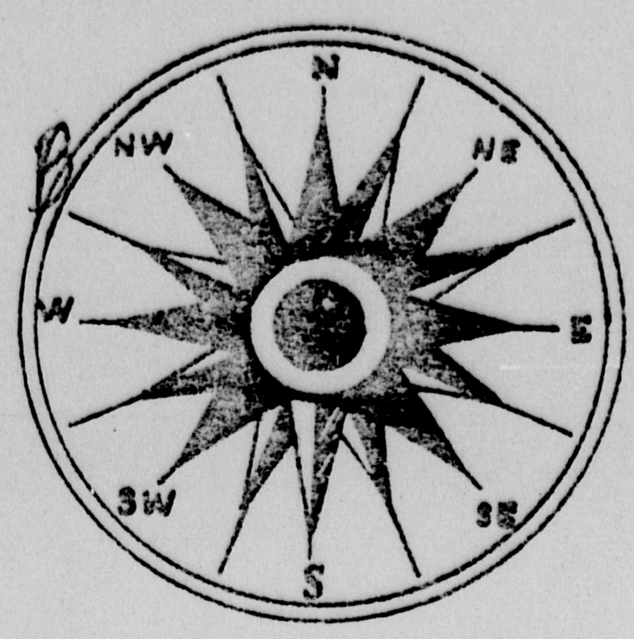
25. Did you observe the object through any of the following?

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

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:

Mr and Mrs [redacted]
Mrs. [redacted]
Mr+Mrs [redacted]

32. Please give the following information about yourself:

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

ADDRESS [redacted] Dayton (City) 8 (Zone) Ohio (State)

TELEPHONE NUMBER [redacted] AGE 39 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?

2nd (Day) July (Month) 1967 (Year) To the Police

34. Date you completed this questionnaire: 14 (Day) 7 (Month) 1967. (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.