PROJECT 10073 RECORD

1. DATE - TIME GROUP 29 Aug 68 29/2145 30/0145Z	2. LOCATION Bristol, Virginia (3 Witnesses)
3. SOURCE Civilian	10. CONCLUSION INSUFFICIENT DATA FOR EVALUATION The observer and witnesses were requested to complete a form 117 but have not returned them as of 21 Oct 68.
4. NUMBER OF OBJECTS One	
5. LENGTH OF OBSERVATION 1 Minute	11. BRIEF SUMMARY AND ANALYSIS The observer reported to the Duty Officer that he had sighted an object that had revolving red light on the bottom. NOTE: AF Form 117 receive 5 Nov 68. The evaluation INSUFFICIENT DATA still stands, since the observers did not return their forms within a month. Although it appears that the observers may have seen a Hot Air Balloon.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE SW - NE	
8. PHOTOS ☐ Yes ☒ No	
9. PHYSICAL EVIDENCE ☐ Yes ☒ No	

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

SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE

BUDGET BUREAU APPROVAL NUMBER 21-R359

THIS QUESTIONNAIRE HAS BEEN PREPARED SO THAT YOU CAN GIVE THE U.S. AIR FORCE AS MUCH INFORMATION AS POSSIBLE CONCERNING THE UNIDENTIFIED PHENOMENON THAT YOU HAVE OBSERVED. PLEASE TRY TO ANSWER ALL OF THE QUESTIONS. THE INFORMATION YOU GIVE WILL BE USED FOR RESEARCH PURPOSES. YOUR NAME WILL NOT BE USED IN CONNECTION WITH ANY OF YOUR STATEMENTS OR CONCLUSIONS WITHOUT YOUR PERMISSION. RETURN TO AIR FORCE BASE INVESTIGATOR FOR FORWARDING TO FTD (TDETR), WRIGHT-PATTERSON AFB, OHIO 45433, IAW AFR 80-17. *(IF ADDITIONAL SHEETS ARE NEEDED FOR NARRATIVE OR SKETCHES ATTACH SECURELY TO THIS FORM OR ANNOTATE WITH YOUR NAME FOR IDENTIFICATION.)*

1. WHEN DID YOU SEE THE PHENOMENON? DAY 29 MONTH August YEAR 1968

2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON? HOUR 9 MINUTES 45 ☐ A.M. ☑ P.M.

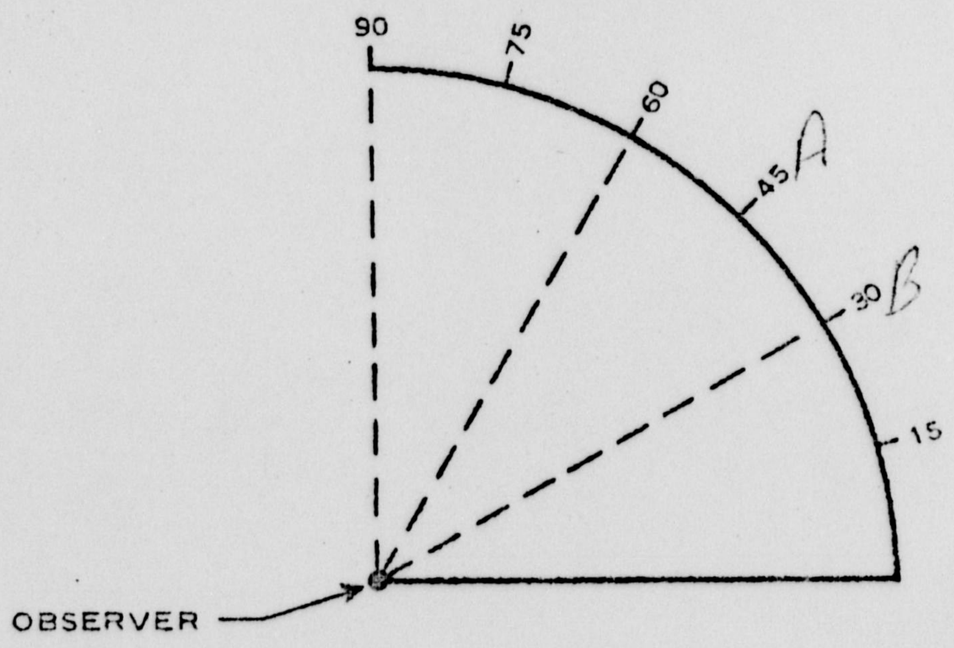
3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON? HOUR 9 MINUTES 45 ☐ A.M. ☑ P.M.

4. TIME ZONE ☑ DAYLIGHT SAVINGS ☐ STANDARD
☑ EASTERN ☐ CENTRAL ☐ MOUNTAIN ☐ PACIFIC ☐ OTHER

5. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? IF IN CITY, GIVE THE NEAREST STREET ADDRESS AND INDICATE ON A HAND DRAWN MAP WHERE YOU WERE STANDING WITH REFERENCE TO THE ADDRESS. IF IN THE COUNTRY, IDENTIFY THE HIGHWAY YOU WERE ON OR NEAR AND TRY TO FIX A DISTANCE AND DIRECTION FROM SOME RECOGNIZABLE LANDMARK.

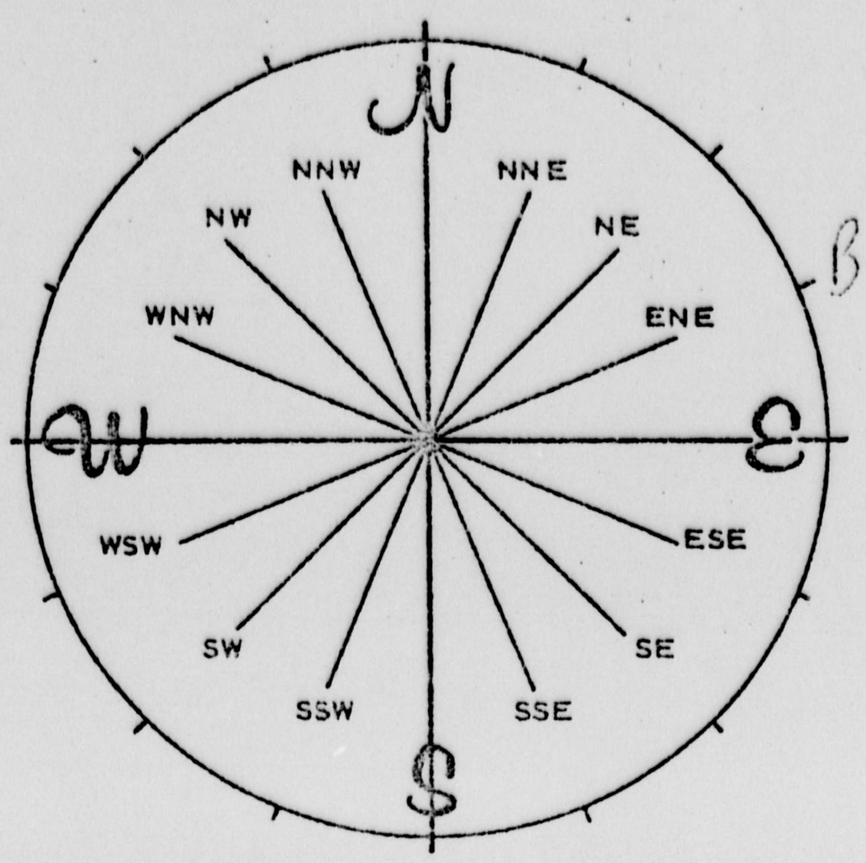
[redacted]
Bristol VA 24201

6. IMAGINE YOU ARE AT THE POINT SHOWN IN THE SKETCH, PLACE AN "A" ON THE CURVED LINE TO SHOW HOW HIGH THE PHENOMENON WAS ABOVE THE HORIZON, OR SKYLINE, WHEN FIRST SEEN. PLACE A "B" ON THE SAME CURVED LINE TO SHOW HOW HIGH ABOVE THE HORIZON THE PHENOMENON WAS WHEN LAST SEEN.



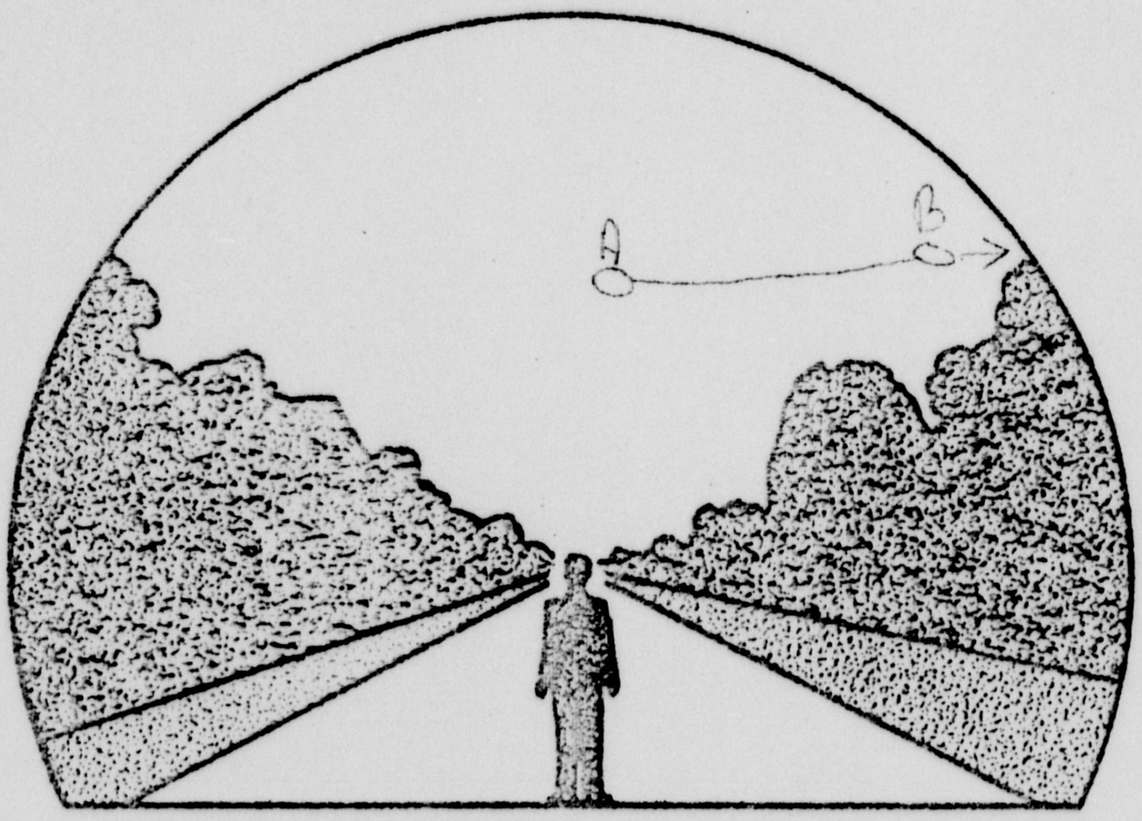
AF FORM AUG 67 117

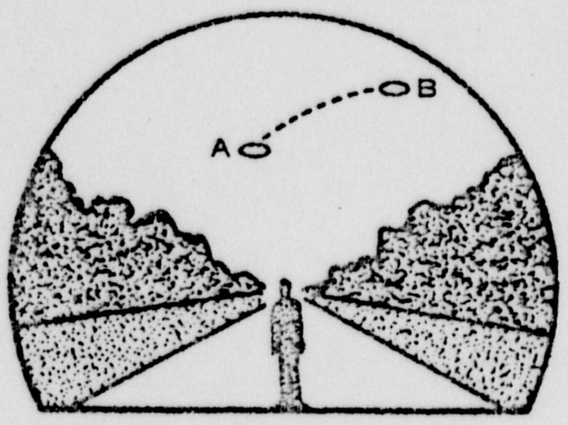
6A. NOW IMAGINE YOU ARE AT THE CENTER OF THE COMPASS ROSE. PLACE AN "A" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN FIRST SEEN. PLACE A "B" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN LAST SEEN.



Add see sheet I came from

7. IN THE SKETCH BELOW, PLACE AN "A" AT THE POSITION OF THE PHENOMENON WHEN FIRST SEEN, AND A "B" AT THE POSITION OF THE PHENOMENON WHEN LAST SEEN. CONNECT THE "A" AND "B" WITH A LINE TO APPROXIMATE THE MOVEMENT OF THE PHENOMENON BETWEEN "A" AND "B". THAT IS, SCHEMATICALLY SHOW WHETHER THE MOVEMENT APPEARED TO BE STRAIGHT, CURVED OR ZIG-ZAG. REFER TO SMALLER SKETCH AS AN EXAMPLE OF HOW TO COMPLETE THE LARGER SKETCH.





8. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? *(Check appropriate blocks.)*

✓	OUTDOORS		IN BUSINESS SECTION OF CITY
	IN BUILDING	✓	IN RESIDENTIAL SECTION OF CITY
	IN CAR ☐ AS DRIVER ☐ AS PASSENGER		IN OPEN COUNTRYSIDE
	IN BOAT		NEAR AIRFIELD
	IN AIRPLANE ☐ AS PILOT ☐ AS PASSENGER		FLYING OVER CITY
	OTHER		FLYING OVER OPEN COUNTRY
			OTHER

A. IF YOU WERE IN A VEHICLE, COMPLETE THE FOLLOWING:

WHAT DIRECTION WERE YOU MOVING?

	NORTH		EAST
	SOUTH		WEST
	NORTHEAST		SOUTHEAST
	NORTHWEST		SOUTHWEST

HOW FAST WERE YOU MOVING?

DID YOU STOP ANYTIME WHILE OBSERVING THE PHENOMENON? ☐ YES ☐ NO

EXPLAIN WHETHER SUCH MOVEMENT AFFECTS YOUR SKETCHES IN ITEMS 5 AND 6.

DESCRIBE TYPE OF VEHICLE YOU WERE IN AND TYPE OF ROAD, TERRAIN OR BODY OF WATER YOU TRAVERSED DURING THE SIGHTING. STATE WHETHER WINDOWS OR CONVERTIBLE TOP WERE UP OR DOWN.

HOW MUCH OTHER TRAFFIC WAS THERE?

DID YOU NOTICE ANY AIRPLANES? ☐ YES ☑ NO. IF "YES," DESCRIBE WHEN THEY WERE IN SIGHT RELATIVE TO THE TIME OF SIGHTING THE PHENOMENON AND WHERE THEY WERE IN THE SKY RELATIVE TO THE POSITION OF THE PHENOMENON.

9. HOW LONG WAS THE PHENOMENON IN SIGHT?

LENGTH OF TIME: About 5 minuts

	CERTAIN OF TIME		NOT VERY SURE
✓	FAIRLY CERTAIN		JUST A GUESS

HOW WAS TIME DETERMINED? A Guess

WAS THE PHENOMENON IN SIGHT CONTINUOUSLY? ☐ YES ☑ NO. IF "NO," INDICATE WHETHER THIS IS DUE TO YOUR MOVEMENT OR THE BEHAVIOR OF THE PHENOMENON, AND DESCRIBE SUCH MOVEMENT OR BEHAVIOR. INDICATE DISAPPEARANCES ON PREVIOUS SKETCHES.

Couldn't see because of strut light.

10. IF THERE WERE MORE THAN ONE PHENOMENON, HOW MANY WERE THERE? DRAW A PICTURE TO SHOW HOW THEY WERE ARRANGED. DID THIS ARRANGEMENT CHANGE DURING THE SIGHTING?

Just one

11. CONDITIONS *(Check appropriate blocks.)*

A. SKY		B. WEATHER			
	DAY		CUMULUS CLOUDS *(Low fluffy)*		FOG OR MIST
	TWILIGHT		CIRRUS CLOUDS *(High fleecy or Herring-bone)*		HEAVY RAIN
✓	NIGHT				LIGHT RAIN OR DRIZZLE
X	CLEAR		NIMBUS CLOUDS *(Rain)*		HAIL
✓	PARTLY CLOUDY		CUMULONIMBUS CLOUDS *(Thunderstorms)*		SNOW OR SLEET
	COMPLETELY OVERCAST			✓	UNKNOWN
			HAZE OR SMOG		NONE OF THE ABOVE

C. IF THE SIGHTING WAS AT TWILIGHT OR NIGHT, WHAT DID YOU NOTICE ABOUT THE STARS AND MOON?

(1) STARS		(2) MOON		
	NONE		BRIGHT MOONLIGHT		NO MOONLIGHT
	A FEW		MOON WITH HALO	✓	UNKNOWN
✓	MANY		MOON HIDDEN BY CLOUDS		
	UNKNOWN		PARTIAL *(New or quarter)*		

D. IF SIGHTING WAS IN DAYLIGHT, WAS THE SUN VISIBLE? ☐ YES ☐ NO. IF "YES," WHERE WAS THE SUN AS YOU FACED THE PHENOMENON?

	IN FRONT OF YOU		TO YOUR RIGHT		OVERHEAD *(Near noon)*
	IN BACK OF YOU		TO YOUR LEFT		UNKNOWN

E. SPECIFY THE MAJOR SOURCE OF ILLUMINATION PRESENT DURING THE SIGHTING, SUCH AS THE SUN, HEADLIGHTS OR STREET LAMP, ETC. FOR TERRESTRIAL ILLUMINATION, SPECIFY DISTANCE TO LIGHT SOURCE.

Street light 40 yards away

12. GIVE A BRIEF DESCRIPTION OF THE PHENOMENON, INDICATING WHETHER IT APPEARED DARK OR LIGHT, WHETHER IT REFLECTED LIGHT OR WAS SELF-LUMINOUS AND WHAT COLORS YOU NOTICED. DESCRIBE YOUR IMPRESSION OF WHETHER IT WAS SOLID OR TRANSPARENT, WHETHER EDGES WERE SHARP OR FUZZY. DESCRIBE THE SHAPE OR INDICATE IF IT APPEARED AS A POINT OF LIGHT. INDICATE COMPARISONS WITH OTHER OBSERVED OBJECTS, LIKE STARS, A LIGHT OR OTHER OBJECT IN YOUR FIELD OF VIEW.

It appeard light, solid, with fuzzy edges.

It was round with 6 to 8 red lights on the bottom

13. DID THE PHENOMENON	YES	NO	UNKNOWN
MOVE IN A STRAIGHT LINE?	✓		
STAND STILL AT ANYTIME?	✓		
SUDDENLY SPEED UP AND RUN AWAY?	✓		
BREAK UP IN PARTS AND EXPLODE?		✓	
CHANGE COLOR?		✓	
GIVE OFF SMOKE?		✓	
CHANGE BRIGHTNESS?		✓	
CHANGE SHAPE?		✓	
FLASH OR FLICKER?		✓	
DISAPPEAR AND REAPPEAR?		✓	
SPIN LIKE A TOP?	✓		
MAKE A NOISE?		✓	
FLUTTER OR WOBBLE?			✓

14. WHAT DREW YOUR ATTENTION TO THE PHENOMENON?

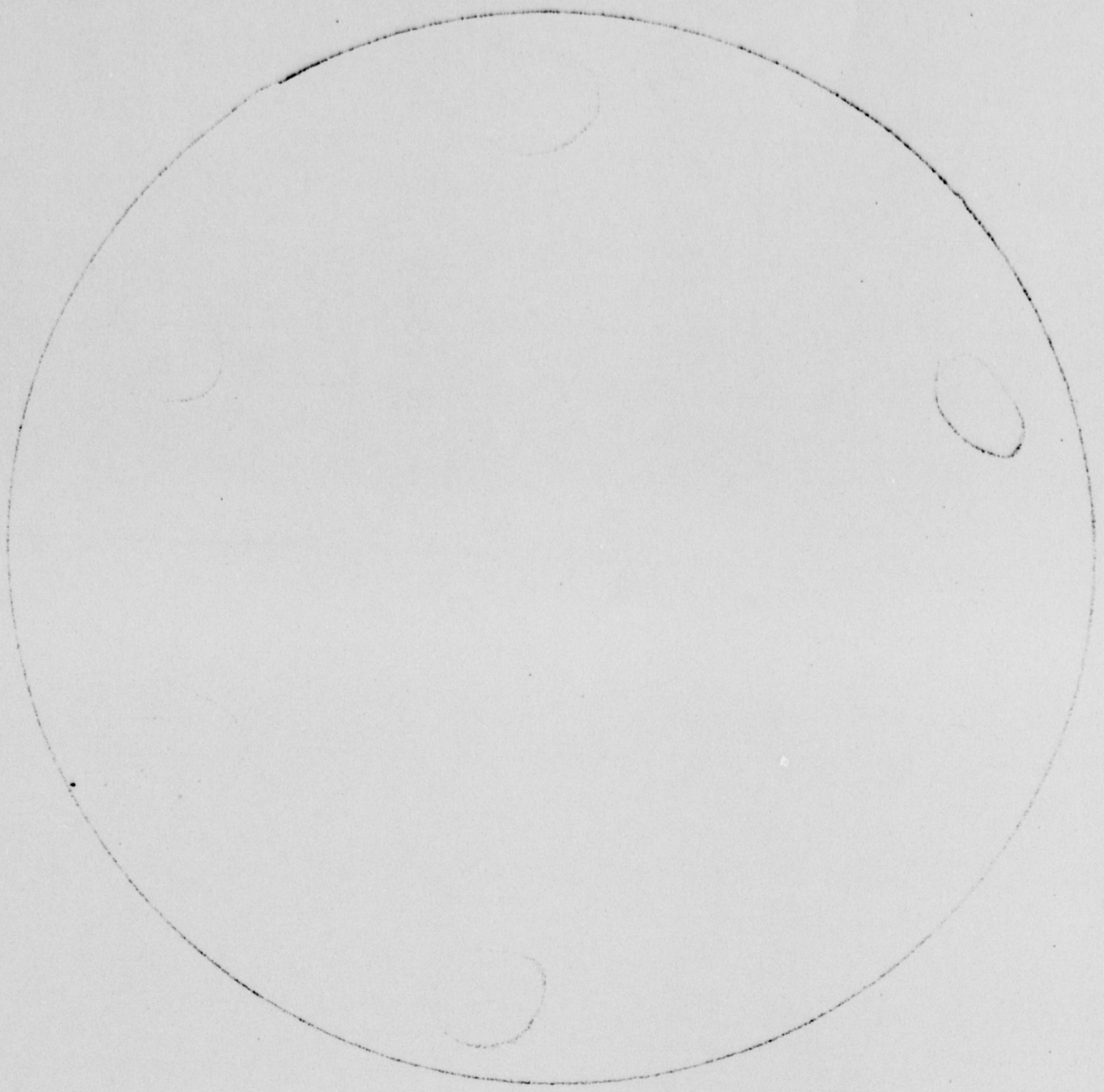
Brother and Aunt

A. HOW DID IT FINALLY DISAPPEAR?

Flew away

B. DID THE PHENOMENON MOVE BEHIND OR IN FRONT OF SOMETHING, LIKE A CLOUD, TREE, OR BUILDING AT ANY TIME?
☐ YES ☐ NO. IF "YES," DESCRIBE.

15. DRAW A PICTURE THAT WILL SHOW THE SHAPE OF THE PHENOMENON. INCLUDE AND LABEL ANY DETAILS THAT MIGHT HAVE APPEARED AS WINGS OR PROTRUSIONS, AND INDICATE EXHAUST OR VAPOR TRAILS. INDICATE BY AN ARROW THE DIRECTION THE PHENOMENON WAS MOVING.



16. WHAT WAS THE ANGULAR SIZE? HOLD A MATCH AT ARM'S LENGTH IN FRONT OF A KNOWN OBJECT, SUCH AS A STREET LAMP OR THE MOON. NOTE HOW MUCH OF THE OBJECT IS COVERED BY THE HEAD OF THE MATCH. NOW IF YOU HAD BEEN ABLE TO PERFORM THIS EXPERIMENT AT THE TIME OF THE SIGHTING, ESTIMATE WHAT FRACTION OF THE PHENOMENON WOULD HAVE BEEN COVERED BY THE MATCH HEAD.

all

17. DID YOU OBSERVE THE PHENOMENON THROUGH ANY OF THE FOLLOWING? INCLUDE INFORMATION ON MODEL, TYPE, FILTER, LENS PRESCRIPTION OR OTHER APPLICABLE DATA.

	EYEGLASSES		CAMERA VIEWER
	SUNGLASSES	✓	BINOCULARS Stellar 4x40
	WINDSHIELD		TELESCOPE
	SIDE WINDOW OF VEHICLE		THEODOLITE
	WINDOWPANE		OTHER

A. DO YOU ORDINARILY WEAR GLASSES? ☐ YES ☑ NO

B. DO YOU USE READING GLASSES? ☐ YES ☑ NO

18. WHAT WAS YOUR IMPRESSION OF THE SPEED OF THE PHENOMENON? GIVE ESTIMATE OF SPEED 25 m.p.h.

19. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE PHENOMENON? GIVE ESTIMATE OF DISTANCE 90.

20. IN ORDER THAT WE MAY OBTAIN AS CLEAR A PICTURE AS POSSIBLE OF WHAT YOU SAW, DESCRIBE IN YOUR OWN WORDS A COMMON OBJECT OR OBJECTS WHICH, WHEN PLACED IN THE SKY, SIMILAR TO WHERE YOU NOTED THE PHENOMENON, WOULD BEAR SOME RESEMBLANCE TO WHAT YOU SAW. DESCRIBE SIMILARITIES AND DIFFERENCES BETWEEN THE COMMON OBJECT AND WHAT YOU SAW.

The Bottom of the alien space ships on the television programe "The Invaders" Staring David Vincent.

21. DID YOU NOTICE ANY ODOR, NOISE, OR HEAT EMANATING FROM THE PHENOMENON OR ANY EFFECT ON YOURSELF, ANIMALS OR MACHINERY IN THE VICINITY? ☐ YES ☑ NO. IF "YES," DESCRIBE.

A. DID THE PHENOMENON DISTURB THE GROUND OR LEAVE ANY PHYSICAL EVIDENCE. ☐ YES ☑ NO. IF "YES," DESCRIBE.

22. HAVE YOU EVER SEEN THIS OR A SIMILAR PHENOMENON BEFORE? ☐ YES ☒ NO. IF "YES," GIVE DATE AND LOCATION.

23. WAS ANYONE WITH YOU AT THE TIME YOU SAW THE PHENOMENON? ☒ YES ☐ NO. IF "YES," DID THEY SEE IT TOO? ☒ YES ☐ NO.

A. LIST THEIR NAMES AND ADDRESSES

[redacted]

Bristol VA. 24201

Mrs. [redacted]

Bristol VA. 24201

24. GIVE THE FOLLOWING INFORMATION ABOUT YOURSELF

LAST NAME, FIRST NAME, MIDDLE NAME [redacted]

ADDRESS (Street, City, State and Zip Code) [redacted] Bristol Virginia 24201

TELEPHONE (Area Code) [redacted]

AGE		MALE		FEMALE
11	✓			

INDICATE ADDITIONAL INFORMATION INCLUDING OCCUPATION AND ANY EXPERIENCE WHICH MAY BE PERTINENT.

Student at High Point Elementary

25. WHEN AND TO WHOM DID YOU REPORT THAT YOU HAD SIGHTED THIS PHENOMENON?

NAME [redacted] DAY _____ MONTH _____ YEAR _____

26. DATE YOU COMPLETED THIS QUESTIONNAIRE.

DAY 22 MONTH September YEAR 1965

17. DID YOU OBSERVE THE PHENOMENON THROUGH ANY OF THE FOLLOWING? INCLUDE INFORMATION ON MODEL, TYPE, FILTER, LENS PRESCRIPTION OR OTHER APPLICABLE DATA.

	EYEGLASSES		CAMERA VIEWER
	SUNGLASSES	✓	BINOCULARS Stellar 4x40
	WINDSHIELD		TELESCOPE
	SIDE WINDOW OF VEHICLE		THEODOLITE
	WINDOWPANE		OTHER

A. DO YOU ORDINARILY WEAR GLASSES? ☐ YES ☑ NO

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The Bottom of the alien space ships
On the television programe "The Invaders"
Staring David Vincent.

21. DID YOU NOTICE ANY ODOR, NOISE, OR HEAT EMANATING FROM THE PHENOMENON OR ANY EFFECT ON YOURSELF, ANIMALS OR MACHINERY IN THE VICINITY? ☐ YES ☑ NO. IF "YES," DESCRIBE.

A. DID THE PHENOMENON DISTURB THE GROUND OR LEAVE ANY PHYSICAL EVIDENCE. ☐ YES ☑ NO. IF "YES," DESCRIBE.

AFR 80-17(C1)

SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE

BUDGET BUREAU APPROVAL NUMBER 21-R230

THIS QUESTIONNAIRE HAS BEEN PREPARED SO THAT YOU CAN GIVE THE U.S. AIR FORCE AS MUCH INFORMATION AS POSSIBLE CONCERNING THE UNIDENTIFIED PHENOMENON THAT YOU HAVE OBSERVED. PLEASE TRY TO ANSWER ALL OF THE QUESTIONS. THE INFORMATION YOU GIVE WILL BE USED FOR RESEARCH PURPOSES. YOUR NAME WILL NOT BE USED IN CONNECTION WITH ANY OF YOUR STATEMENTS OR CONCLUSIONS WITHOUT YOUR PERMISSION. RETURN TO AIR FORCE BASE INVESTIGATOR FOR FORWARDING TO FTD (TDETR), WRIGHT-PATTERSON AFB, OHIO 45433, IAW AFR 80-17. *(IF ADDITIONAL SHEETS ARE NEEDED FOR NARRATIVE OR SKETCHES ATTACH SECURELY TO THIS FORM OR ANNOTATE WITH YOUR NAME FOR IDENTIFICATION.)*

1. WHEN DID YOU SEE THE PHENOMENON?
DAY 29 MONTH August YEAR 1968

2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON?
HOUR 9 MINUTES 45 ☐ A.M. ☒ P.M.

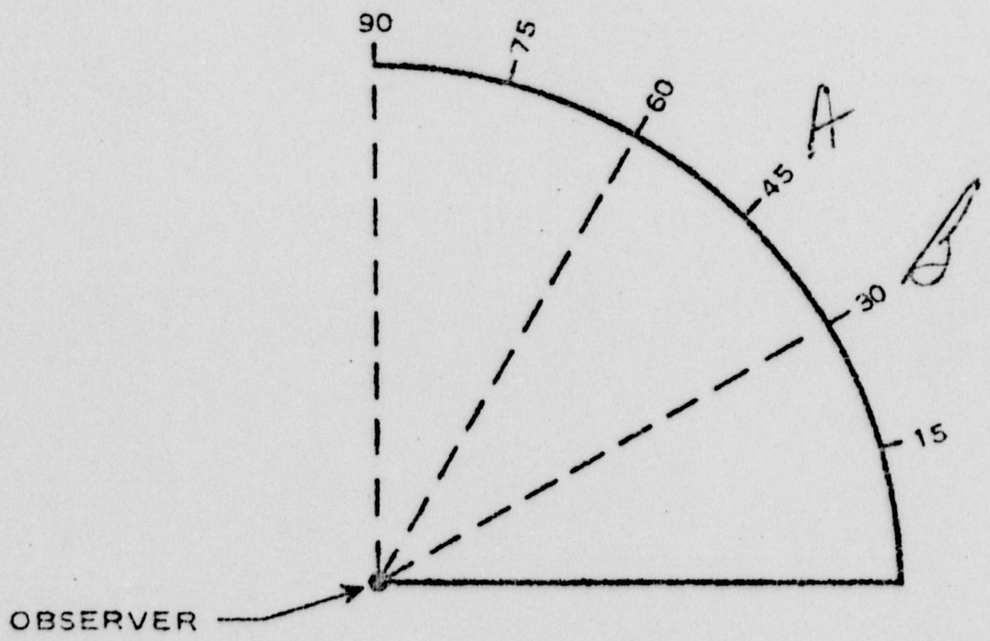
3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON?
HOUR _____ MINUTES _____ ☐ A.M. ☐ P.M.

4. TIME/ZONE ☒ DAYLIGHT SAVINGS ☐ STANDARD
☒ EASTERN ☐ CENTRAL ☐ MOUNTAIN ☐ PACIFIC ☐ OTHER

5. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? IF IN CITY, GIVE THE NEAREST STREET ADDRESS AND INDICATE ON A HAND DRAWN MAP WHERE YOU WERE STANDING WITH REFERENCE TO THE ADDRESS. IF IN THE COUNTRY, IDENTIFY THE HIGHWAY YOU WERE ON OR NEAR AND TRY TO FIX A DISTANCE AND DIRECTION FROM SOME RECOGNIZABLE LANDMARK.

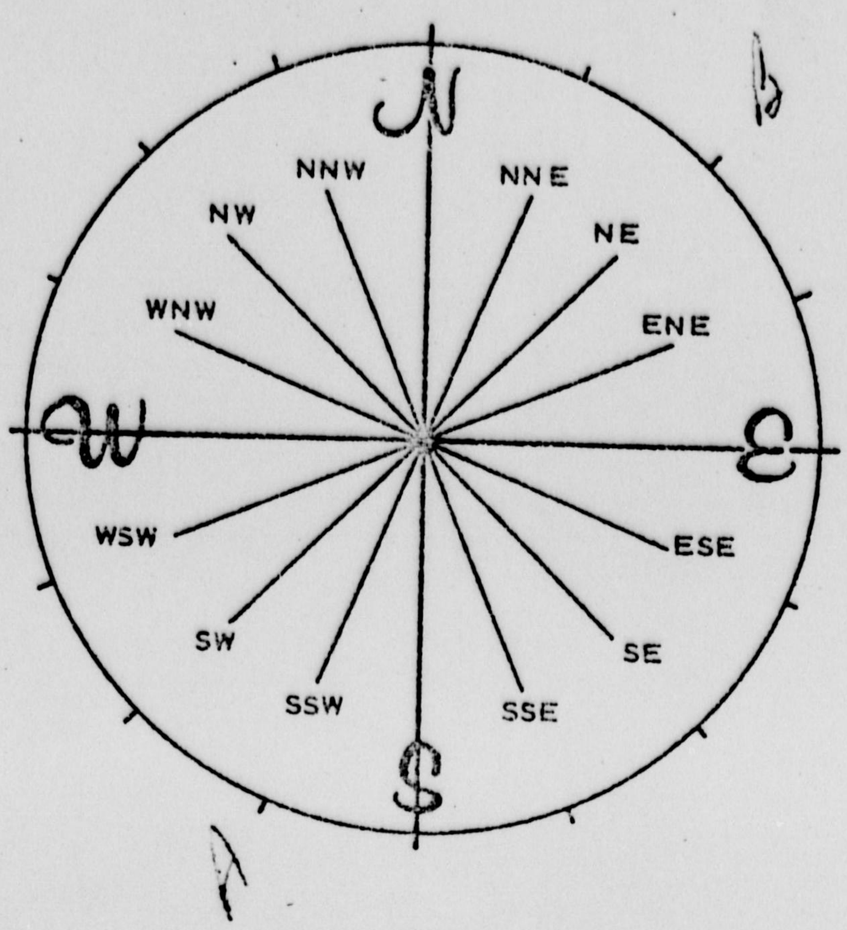
[redacted] Lane
Bristol, Virginia 24201

6. IMAGINE YOU ARE AT THE POINT SHOWN IN THE SKETCH, PLACE AN "A" ON THE CURVED LINE TO SHOW HOW HIGH THE PHENOMENON WAS ABOVE THE HORIZON, OR SKYLINE, WHEN FIRST SEEN. PLACE A "B" ON THE SAME CURVED LINE TO SHOW HOW HIGH ABOVE THE HORIZON THE PHENOMENON WAS WHEN LAST SEEN.

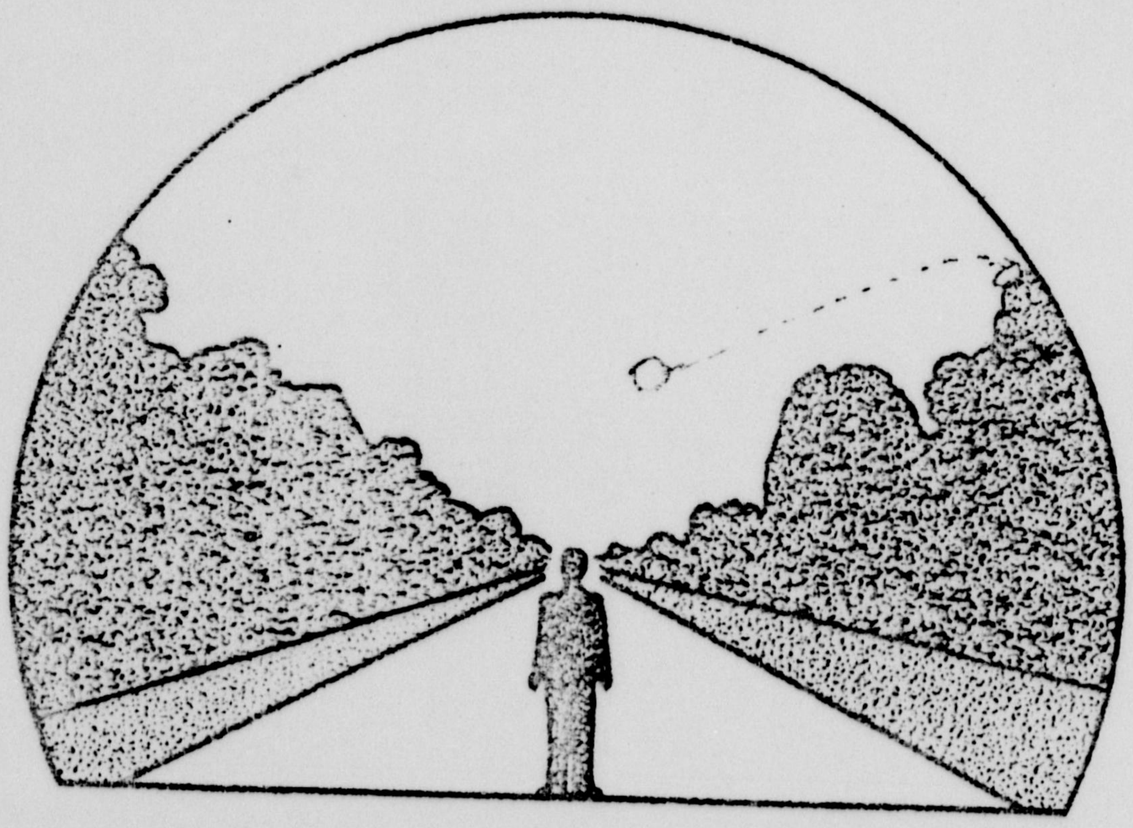


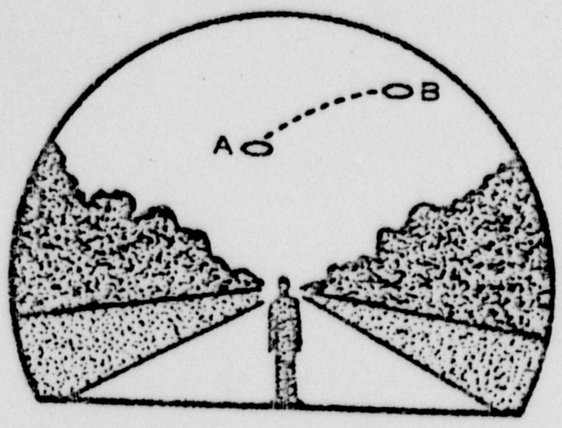
AF FORM AUG 67 117

6A. NOW IMAGINE YOU ARE AT THE CENTER OF THE COMPASS ROSE. PLACE AN "A" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN FIRST SEEN. PLACE A "B" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN LAST SEEN.



7. IN THE SKETCH BELOW, PLACE AN "A" AT THE POSITION OF THE PHENOMENON WHEN FIRST SEEN, AND A "B" AT THE POSITION OF THE PHENOMENON WHEN LAST SEEN. CONNECT THE "A" AND "B" WITH A LINE TO APPROXIMATE THE MOVEMENT OF THE PHENOMENON BETWEEN "A" AND "B". THAT IS, SCHEMATICALLY SHOW WHETHER THE MOVEMENT APPEARED TO BE STRAIGHT, CURVED OR ZIG-ZAG. REFER TO SMALLER SKETCH AS AN EXAMPLE OF HOW TO COMPLETE THE LARGER SKETCH.





8. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? *(Check appropriate blocks.)*

✓	OUTDOORS		IN BUSINESS SECTION OF CITY
	IN BUILDING	✓	IN RESIDENTIAL SECTION OF CITY
	IN CAR ☐ AS DRIVER ☐ AS PASSENGER		IN OPEN COUNTRYSIDE
	IN BOAT		NEAR AIRFIELD
	IN AIRPLANE ☐ AS PILOT ☐ AS PASSENGER		FLYING OVER CITY
	OTHER		FLYING OVER OPEN COUNTRY
			OTHER

A. IF YOU WERE IN A VEHICLE, COMPLETE THE FOLLOWING:

WHAT DIRECTION WERE YOU MOVING?				HOW FAST WERE YOU MOVING?
	NORTH		EAST	
	SOUTH		WEST	DID YOU STOP ANYTIME WHILE OBSERVING THE PHENOMENON?
	NORTHEAST		SOUTHEAST	
	NORTHWEST		SOUTHWEST	☐ YES ☐ NO

EXPLAIN WHETHER SUCH MOVEMENT AFFECTS YOUR SKETCHES IN ITEMS 5 AND 6.

DESCRIBE TYPE OF VEHICLE YOU WERE IN AND TYPE OF ROAD, TERRAIN OR BODY OF WATER YOU TRAVERSED DURING THE SIGHTING. STATE WHETHER WINDOWS OR CONVERTIBLE TOP WERE UP OR DOWN.

HOW MUCH OTHER TRAFFIC WAS THERE?

DID YOU NOTICE ANY AIRPLANES? ☐ YES ☑ NO. IF "YES," DESCRIBE WHEN THEY WERE IN SIGHT RELATIVE TO THE TIME OF SIGHTING THE PHENOMENON AND WHERE THEY WERE IN THE SKY RELATIVE TO THE POSITION OF THE PHENOMENON.

9. HOW LONG WAS THE PHENOMENON IN SIGHT?

LENGTH OF TIME				
Did Not Keep Time		CERTAIN OF TIME	✓	NOT VERY SURE
		FAIRLY CERTAIN	✓	JUST A GUESS

HOW WAS TIME DETERMINED?

WAS THE PHENOMENON IN SIGHT CONTINUOUSLY? ☐ YES ☑ NO. IF "NO," INDICATE WHETHER THIS IS DUE TO YOUR MOVEMENT OR THE BEHAVIOR OF THE PHENOMENON, AND DESCRIBE SUCH MOVEMENT OR BEHAVIOR. INDICATE DISAPPEARANCES ON PREVIOUS SKETCHES.

Glare from Street Light

10. IF THERE WERE MORE THAN ONE PHENOMENON, HOW MANY WERE THERE? DRAW A PICTURE TO SHOW HOW THEY WERE ARRANGED. DID THIS ARRANGEMENT CHANGE DURING THE SIGHTING?

Only One

11. CONDITIONS *(Check appropriate blocks.)*

A. SKY		B. WEATHER			
	DAY		CUMULUS CLOUDS *(Low fluffy)*		FOG OR MIST
	TWILIGHT		CIRRUS CLOUDS *(High fleecy or Herring-bone)*		HEAVY RAIN
✓	NIGHT				LIGHT RAIN OR DRIZZLE
✓	CLEAR		NIMBUS CLOUDS *(Rain)*		HAIL
	PARTLY CLOUDY		CUMULONIMBUS CLOUDS *(Thunderstorms)*		SNOW OR SLEET
	COMPLETELY OVERCAST				UNKNOWN
			HAZE OR SMOG		NONE OF THE ABOVE

C. IF THE SIGHTING WAS AT TWILIGHT OR NIGHT, WHAT DID YOU NOTICE ABOUT THE STARS AND MOON?

(1) STARS		(2) MOON		
	NONE	✓	BRIGHT MOONLIGHT	NO MOONLIGHT
	A FEW		MOON WITH HALO	UNKNOWN
✓	MANY		MOON HIDDEN BY CLOUDS	
	UNKNOWN		PARTIAL *(New or quarter)*	

D. IF SIGHTING WAS IN DAYLIGHT, WAS THE SUN VISIBLE? ☐ YES ☐ NO. IF "YES," WHERE WAS THE SUN AS YOU FACED THE PHENOMENON?

	IN FRONT OF YOU	TO YOUR RIGHT	OVERHEAD *(Near noon)*
	IN BACK OF YOU	TO YOUR LEFT	UNKNOWN

E. SPECIFY THE MAJOR SOURCE OF ILLUMINATION PRESENT DURING THE SIGHTING, SUCH AS THE SUN, HEADLIGHTS OR STREET LAMP, ETC. FOR TERRESTRIAL ILLUMINATION, SPECIFY DISTANCE TO LIGHT SOURCE.

Stout light & object.

12. GIVE A BRIEF DESCRIPTION OF THE PHENOMENON, INDICATING WHETHER IT APPEARED DARK OR LIGHT, WHETHER IT REFLECTED LIGHT OR WAS SELF-LUMINOUS AND WHAT COLORS YOU NOTICED. DESCRIBE YOUR IMPRESSION OF WHETHER IT WAS SOLID OR TRANSPARENT, WHETHER EDGES WERE SHARP OR FUZZY. DESCRIBE THE SHAPE OR INDICATE IF IT APPEARED AS A POINT OF LIGHT. INDICATE COMPARISONS WITH OTHER OBSERVED OBJECTS, LIKE STARS, A LIGHT OR OTHER OBJECT IN YOUR FIELD OF VIEW.

Circular object with 8 to 10 red lights on bottom. The object was very clear

13. DID THE PHENOMENON	YES	NO	UNKNOWN
MOVE IN A STRAIGHT LINE?		✓	
STAND STILL AT ANYTIME?	✓		
SUDDENLY SPEED UP AND RUN AWAY?		✓	
BREAK UP IN PARTS AND EXPLODE?		✓	
CHANGE COLOR?		✓	
GIVE OFF SMOKE?		✓	
CHANGE BRIGHTNESS?		✓	
CHANGE SHAPE?		✓	
FLASH OR FLICKER?		✓	
DISAPPEAR AND REAPPEAR?		✓	
SPIN LIKE A TOP?		✓	
MAKE A NOISE?		✓	
FLUTTER OR WOBBLE?		✓	

14. WHAT DREW YOUR ATTENTION TO THE PHENOMENON?

Flew nephew

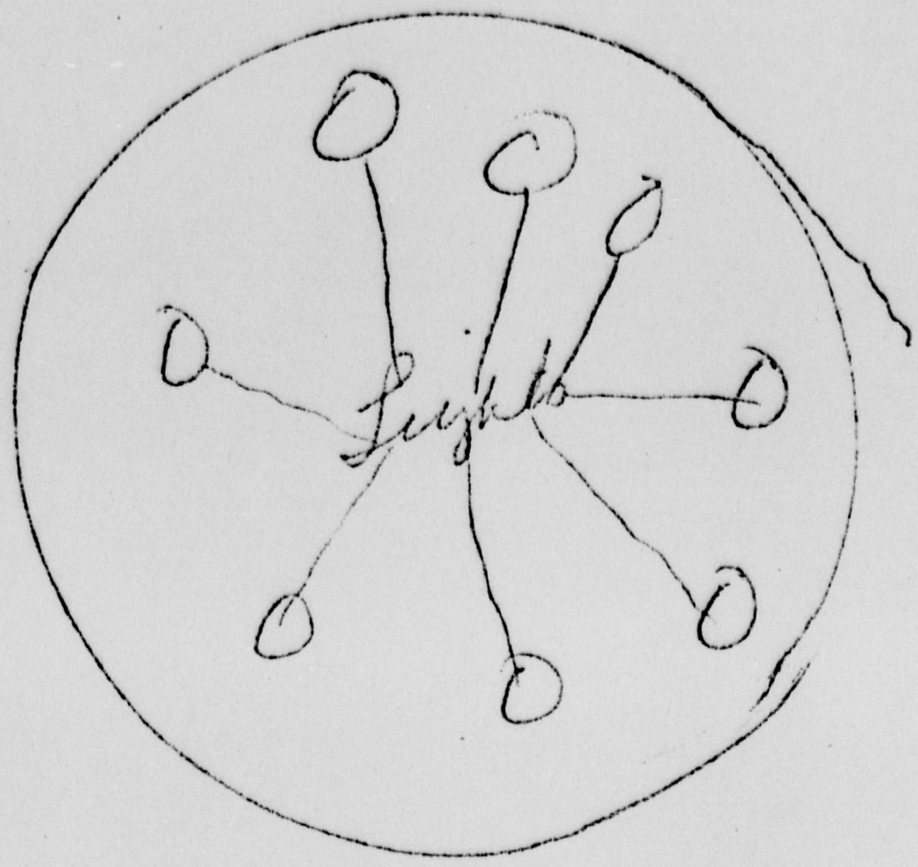
A. HOW DID IT FINALLY DISAPPEAR?

flew away

B. DID THE PHENOMENON MOVE BEHIND OR IN FRONT OF SOMETHING, LIKE A CLOUD, TREE, OR BUILDING AT ANY TIME?
☒ YES ☐ NO. IF "YES," DESCRIBE.

Behind a Tree & flew changed direction

15. DRAW A PICTURE THAT WILL SHOW THE SHAPE OF THE PHENOMENON. INCLUDE AND LABEL ANY DETAILS THAT MIGHT HAVE APPEARED AS WINGS OR PROTRUSIONS, AND INDICATE EXHAUST OR VAPOR TRAILS. INDICATE BY AN ARROW THE DIRECTION THE PHENOMENON WAS MOVING.



Balloon ? U.F.O.

16. WHAT WAS THE ANGULAR SIZE? HOLD A MATCH AT ARM'S LENGTH IN FRONT OF A KNOWN OBJECT, SUCH AS A STREET LAMP OR THE MOON. NOTE HOW MUCH OF THE OBJECT IS COVERED BY THE HEAD OF THE MATCH. NOW IF YOU HAD BEEN ABLE TO PERFORM THIS EXPERIMENT AT THE TIME OF THE SIGHTING, ESTIMATE WHAT FRACTION OF THE PHENOMENON WOULD HAVE BEEN COVERED BY THE MATCH HEAD.

17. DID YOU OBSERVE THE PHENOMENON THROUGH ANY OF THE FOLLOWING? INCLUDE INFORMATION ON MODEL, TYPE, FILTER, LENS PRESCRIPTION OR OTHER APPLICABLE DATA.

	EYEGLASSES		CAMERA VIEWER
	SUNGLASSES	✓	BINOCULARS Stellar 4x40
	WINDSHIELD		TELESCOPE
	SIDE WINDOW OF VEHICLE		THEODOLITE
	WINDOWPANE		OTHER

A. DO YOU ORDINARILY WEAR GLASSES? ☐ YES ☐ NO

B. DO YOU USE READING GLASSES? ☐ YES ☒ NO

18. WHAT WAS YOUR IMPRESSION OF THE SPEED OF THE PHENOMENON? GIVE ESTIMATE OF SPEED 150 to 200 mph.

19. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE PHENOMENON? GIVE ESTIMATE OF DISTANCE _____.

20. IN ORDER THAT WE MAY OBTAIN AS CLEAR A PICTURE AS POSSIBLE OF WHAT YOU SAW, DESCRIBE IN YOUR OWN WORDS A COMMON OBJECT OR OBJECTS WHICH, WHEN PLACED IN THE SKY, SIMILAR TO WHERE YOU NOTED THE PHENOMENON, WOULD BEAR SOME RESEMBLANCE TO WHAT YOU SAW. DESCRIBE SIMILARITIES AND DIFFERENCES BETWEEN THE COMMON OBJECT AND WHAT YOU SAW.

21. DID YOU NOTICE ANY ODOR, NOISE, OR HEAT EMANATING FROM THE PHENOMENON OR ANY EFFECT ON YOURSELF, ANIMALS OR MACHINERY IN THE VICINITY? ☐ YES ☒ NO. IF "YES," DESCRIBE.

A. DID THE PHENOMENON DISTURB THE GROUND OR LEAVE ANY PHYSICAL EVIDENCE. ☐ YES ☒ NO. IF "YES," DESCRIBE.

22. HAVE YOU EVER SEEN THIS OR A SIMILAR PHENOMENON BEFORE? ☐ YES ☐ NO. IF "YES," GIVE DATE AND LOCATION.

23. WAS ANYONE WITH YOU AT THE TIME YOU SAW THE PHENOMENON? ☒ YES ☐ NO. IF "YES," DID THEY SEE IT TOO? ☒ YES ☐ NO.

A. LIST THEIR NAMES AND ADDRESSES

[redacted] Rd.
Bristol, Va. 24201

24. GIVE THE FOLLOWING INFORMATION ABOUT YOURSELF

LAST NAME, FIRST NAME, MIDDLE NAME [redacted]

ADDRESS (Street, City, State and Zip Code) [redacted] Bristol Va 24201

TELEPHONE (Area code and number) [redacted]	AGE 21	☐ MALE	☒ FEMALE

INDICATE [redacted] INCLUDING OCCUPATION AND ANY EXPERIENCE WHICH MAY BE PERTINENT.

25. WHEN AND TO WHOM DID YOU REPORT THAT YOU HAD SIGHTED THIS PHENOMENON?

NAME _____ DAY _____ MONTH _____ YEAR _____

26. DATE YOU COMPLETED THIS QUESTIONNAIRE. DAY Sunday 3 MONTH November YEAR 1968

27. INFORMATION WHICH YOU FEEL IS PERTINENT BUT WHICH IS NOT ADEQUATELY COVERED IN THIS QUESTIONNAIRE, ALTERNATIVELY PROVIDE A NARRATIVE EXPLANATION OF THE SIGHTING.

AFR 80-17(C1)

SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE

BUDGET BUREAU APPROVAL NUMBER 21-R359

THIS QUESTIONNAIRE HAS BEEN PREPARED SO THAT YOU CAN GIVE THE U.S. AIR FORCE AS MUCH INFORMATION AS POSSIBLE CONCERNING THE UNIDENTIFIED PHENOMENON THAT YOU HAVE OBSERVED. PLEASE TRY TO ANSWER ALL OF THE QUESTIONS. THE INFORMATION YOU GIVE WILL BE USED FOR RESEARCH PURPOSES. YOUR NAME WILL NOT BE USED IN CONNECTION WITH ANY OF YOUR STATEMENTS OR CONCLUSIONS WITHOUT YOUR PERMISSION. RETURN TO AIR FORCE BASE INVESTIGATOR FOR FORWARDING TO FTD (TDETR), WRIGHT-PATTERSON AFB, OHIO 45433, IAW AFR 80-17. *(IF ADDITIONAL SHEETS ARE NEEDED FOR NARRATIVE OR SKETCHES ATTACH SECURELY TO THIS FORM OR ANNOTATE WITH YOUR NAME FOR IDENTIFICATION.)*

1. WHEN DID YOU SEE THE PHENOMENON? DAY 29 MONTH August YEAR 1968

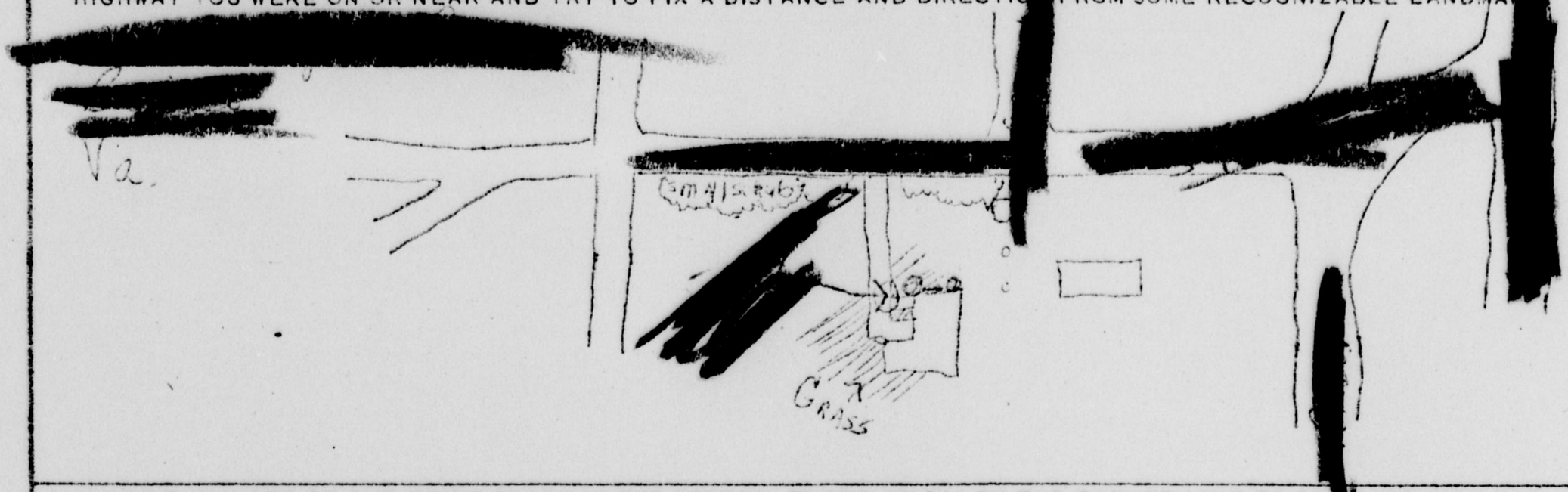
2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON? HOUR 9 MINUTES 45 ☐ A.M. ☑ P.M.

3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON? HOUR 9 MINUTES 45 ☐ A.M. ☑ P.M.

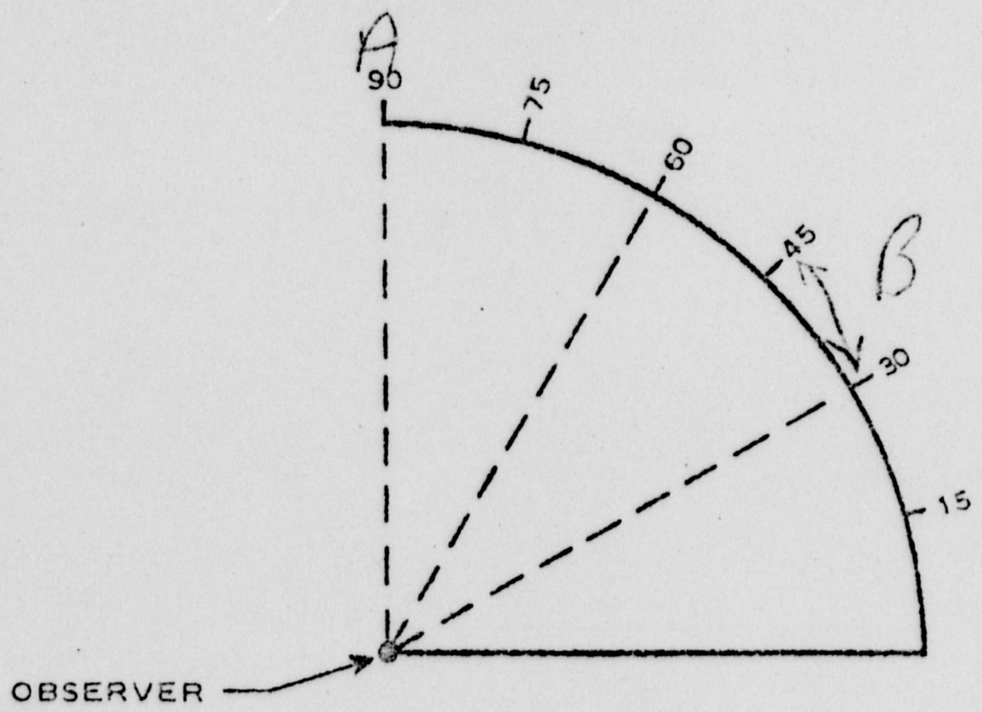
4. TIME/ZONE ☑ DAYLIGHT SAVINGS ☐ STANDARD

☑ EASTERN ☐ CENTRAL ☐ MOUNTAIN ☐ PACIFIC ☐ OTHER

5. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? IF IN CITY, GIVE THE NEAREST STREET ADDRESS AND INDICATE ON A HAND DRAWN MAP WHERE YOU WERE STANDING WITH REFERENCE TO THE ADDRESS. IF IN THE COUNTRY, IDENTIFY THE HIGHWAY YOU WERE ON OR NEAR AND TRY TO FIX A DISTANCE AND DIRECTION FROM SOME RECOGNIZABLE LANDMARK.

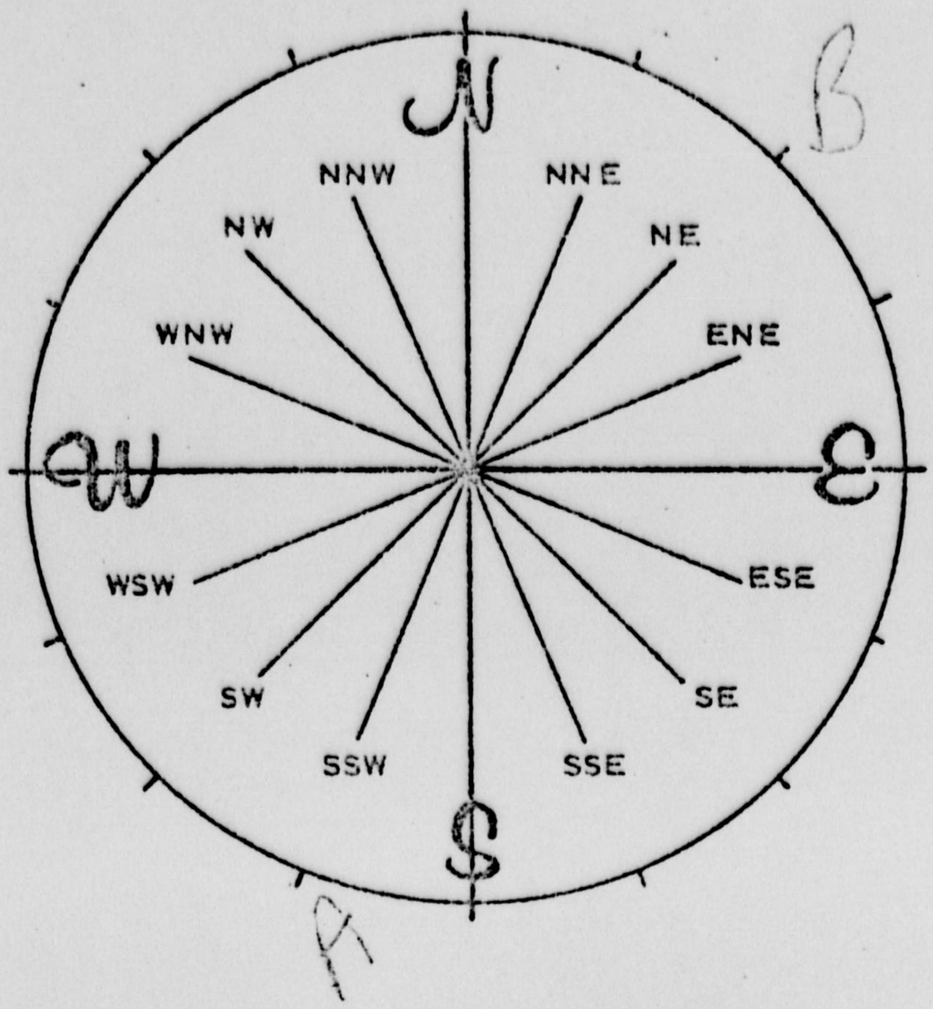


6. IMAGINE YOU ARE AT THE POINT SHOWN IN THE SKETCH, PLACE AN "A" ON THE CURVED LINE TO SHOW HOW HIGH THE PHENOMENON WAS ABOVE THE HORIZON, OR SKYLINE, WHEN FIRST SEEN. PLACE A "B" ON THE SAME CURVED LINE TO SHOW HOW HIGH ABOVE THE HORIZON THE PHENOMENON WAS WHEN LAST SEEN.

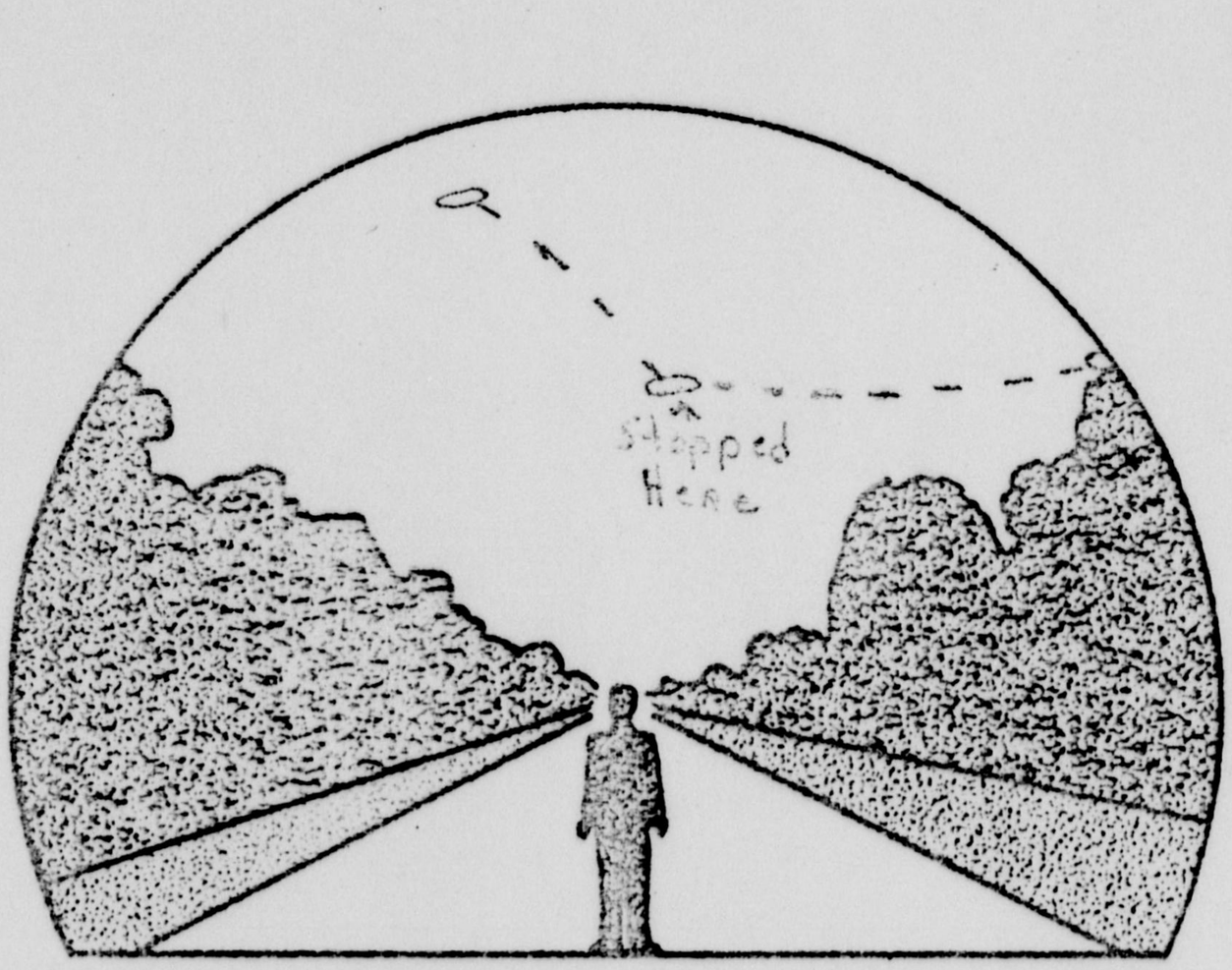


AF FORM AUG 67 117

6A. NOW IMAGINE YOU ARE AT THE CENTER OF THE COMPASS ROSE. PLACE AN "A" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN FIRST SEEN. PLACE A "B" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN LAST SEEN.



7. IN THE SKETCH BELOW, PLACE AN "A" AT THE POSITION OF THE PHENOMENON WHEN FIRST SEEN, AND A "B" AT THE POSITION OF THE PHENOMENON WHEN LAST SEEN. CONNECT THE "A" AND "B" WITH A LINE TO APPROXIMATE THE MOVEMENT OF THE PHENOMENON BETWEEN "A" AND "B". THAT IS, SCHEMATICALLY SHOW WHETHER THE MOVEMENT APPEARED TO BE STRAIGHT, CURVED OR ZIG-ZAG. REFER TO SMALLER SKETCH AS AN EXAMPLE OF HOW TO COMPLETE THE LARGER SKETCH.



8. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? *(Check appropriate blocks.)*

✓	OUTDOORS	X	IN BUSINESS SECTION OF CITY
	IN BUILDING	✓	IN RESIDENTIAL SECTION OF CITY
	IN CAR ☐ AS DRIVER ☐ AS PASSENGER		IN OPEN COUNTRYSIDE
	IN BOAT		NEAR AIRFIELD
	IN AIRPLANE ☐ AS PILOT ☐ AS PASSENGER		FLYING OVER CITY
	OTHER		FLYING OVER OPEN COUNTRY
			OTHER

A. IF YOU WERE IN A VEHICLE, COMPLETE THE FOLLOWING:

WHAT DIRECTION WERE YOU MOVING?				HOW FAST WERE YOU MOVING?
	NORTH		EAST	
	SOUTH		WEST	DID YOU STOP ANYTIME WHILE OBSERVING THE PHENOMENON?
	NORTHEAST		SOUTHEAST	
	NORTHWEST		SOUTHWEST	☐ YES ☐ NO

EXPLAIN WHETHER SUCH MOVEMENT AFFECTS YOUR SKETCHES IN ITEMS 5 AND 6.

DESCRIBE TYPE OF VEHICLE YOU WERE IN AND TYPE OF ROAD, TERRAIN OR BODY OF WATER YOU TRAVERSED DURING THE SIGHTING. STATE WHETHER WINDOWS OR CONVERTIBLE TOP WERE UP OR DOWN.

HOW MUCH OTHER TRAFFIC WAS THERE?

DID YOU NOTICE ANY AIRPLANES? ☐ YES ☑ NO. IF "YES," DESCRIBE WHEN THEY WERE IN SIGHT RELATIVE TO THE TIME OF SIGHTING THE PHENOMENON AND WHERE THEY WERE IN THE SKY RELATIVE TO THE POSITION OF THE PHENOMENON.

9. HOW LONG WAS THE PHENOMENON IN SIGHT?

LENGTH OF TIME				
Didn't Keep track probably under 10 min		CERTAIN OF TIME	✓	NOT VERY SURE
		FAIRLY CERTAIN	✓	JUST A GUESS

HOW WAS TIME DETERMINED?

Just A guess.

WAS THE PHENOMENON IN SIGHT CONTINUOUSLY? ☐ YES ☑ NO. IF "NO," INDICATE WHETHER THIS IS DUE TO YOUR MOVEMENT OR THE BEHAVIOR OF THE PHENOMENON, AND DESCRIBE SUCH MOVEMENT OR BEHAVIOR. INDICATE DISAPPEARANCES ON PREVIOUS SKETCHES.

Because glare of street lamp and tree.

10. IF THERE WERE MORE THAN ONE PHENOMENON, HOW MANY WERE THERE? DRAW A PICTURE TO SHOW HOW THEY WERE ARRANGED. DID THIS ARRANGEMENT CHANGE DURING THE SIGHTING?

Only one

11. CONDITIONS *(Check appropriate blocks.)*

A. SKY		B. WEATHER			
	DAY		CUMULUS CLOUDS *(Low fluffy)*		FOG OR MIST
	TWILIGHT		CIRRUS CLOUDS *(High fleecy or Herring-bone)*		HEAVY RAIN
✓	NIGHT				LIGHT RAIN OR DRIZZLE
✓	CLEAR		NIMBUS CLOUDS *(Rain)*		HAIL
	PARTLY CLOUDY		CUMULONIMBUS CLOUDS *(Thunderstorms)*		SNOW OR SLEET
	COMPLETELY OVERCAST				UNKNOWN
			HAZE OR SMOG	✓	NONE OF THE ABOVE

C. IF THE SIGHTING WAS AT TWILIGHT OR NIGHT, WHAT DID YOU NOTICE ABOUT THE STARS AND MOON?

(1) STARS		(2) MOON			
	NONE	✓	BRIGHT MOONLIGHT		NO MOONLIGHT
	A FEW		MOON WITH HALO		UNKNOWN
✓	MANY		MOON HIDDEN BY CLOUDS		
	UNKNOWN		PARTIAL *(New or quarter)*		

D. IF SIGHTING WAS IN DAYLIGHT, WAS THE SUN VISIBLE? ☐ YES ☐ NO. IF "YES," WHERE WAS THE SUN AS YOU FACED THE PHENOMENON?

	IN FRONT OF YOU		TO YOUR RIGHT		OVERHEAD *(Near noon)*
	IN BACK OF YOU		TO YOUR LEFT		UNKNOWN

E. SPECIFY THE MAJOR SOURCE OF ILLUMINATION PRESENT DURING THE SIGHTING, SUCH AS THE SUN, HEADLIGHTS OR STREET LAMP, ETC. FOR TERRESTRIAL ILLUMINATION, SPECIFY DISTANCE TO LIGHT SOURCE.

The direct stall and Dust lamp 50 feet away

12. GIVE A BRIEF DESCRIPTION OF THE PHENOMENON, INDICATING WHETHER IT APPEARED DARK OR LIGHT, WHETHER IT REFLECTED LIGHT OR WAS SELF-LUMINOUS AND WHAT COLORS YOU NOTICED. DESCRIBE YOUR IMPRESSION OF WHETHER IT WAS SOLID OR TRANSPARENT, WHETHER EDGES WERE SHARP OR FUZZY. DESCRIBE THE SHAPE OR INDICATE IF IT APPEARED AS A POINT OF LIGHT. INDICATE COMPARISONS WITH OTHER OBSERVED OBJECTS, LIKE STARS, A LIGHT OR OTHER OBJECT IN YOUR FIELD OF VIEW.

The phenomenon was a Circular object with about 10 red lights on the bottom. It appeared solid and clear you could distinguish each distinctly.

13. DID THE PHENOMENON	YES	NO	UNKNOWN
MOVE IN A STRAIGHT LINE?		✓	
STAND STILL AT ANYTIME?	✓		
SUDDENLY SPEED UP AND RUN AWAY?		✓	
BREAK UP IN PARTS AND EXPLODE?	X	✓	
CHANGE COLOR?	X	✓	
GIVE OFF SMOKE?		✓	
CHANGE BRIGHTNESS?		✓	
CHANGE SHAPE?		✓	
FLASH OR FLICKER?		✓	
DISAPPEAR AND REAPPEAR?		✓	
SPIN LIKE A TOP?		✓	
MAKE A NOISE?		✓	
FLUTTER OR WOBBLE?		✓	

14. WHAT DREW YOUR ATTENTION TO THE PHENOMENON?

The phenomenon itself.

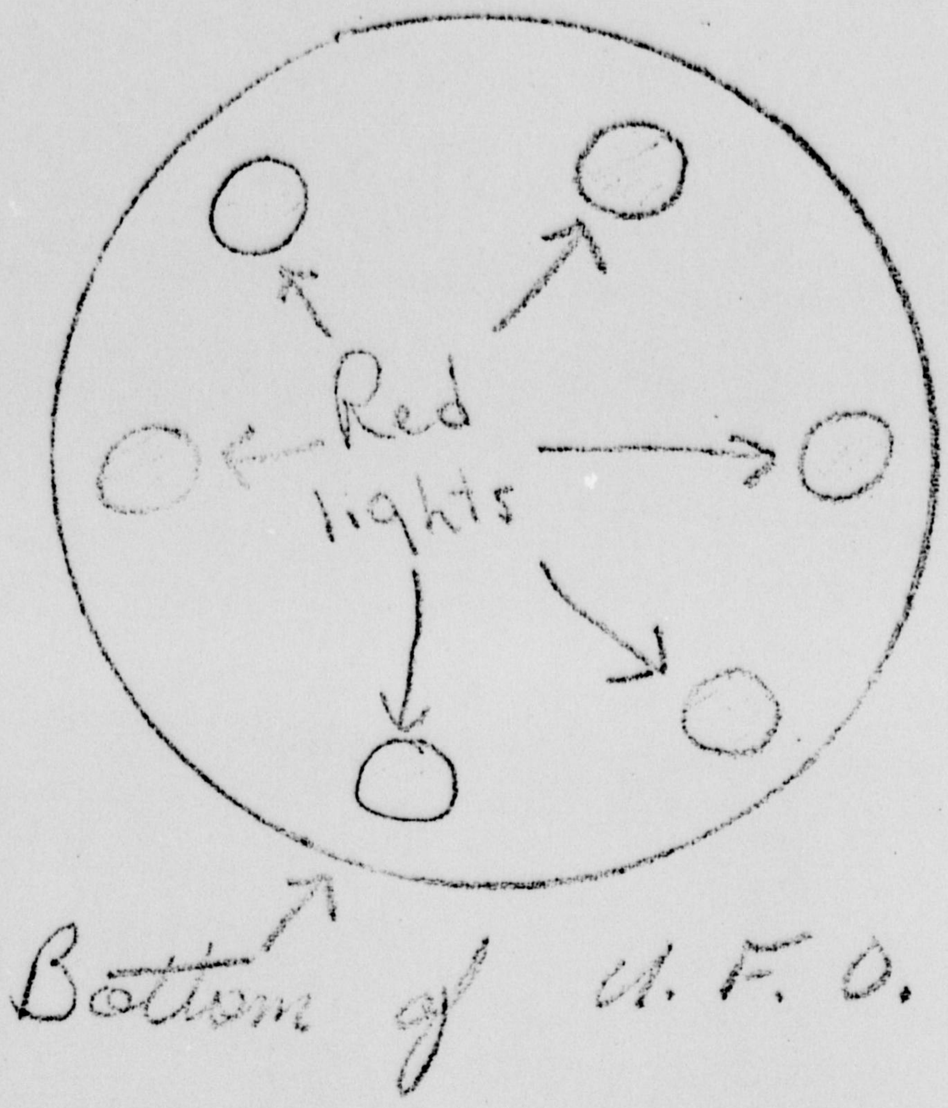
A. HOW DID IT FINALLY DISAPPEAR?

Flew away

B. DID THE PHENOMENON MOVE BEHIND OR IN FRONT OF SOMETHING, LIKE A CLOUD, TREE, OR BUILDING AT ANY TIME?
☑ YES ☐ NO. IF "YES," DESCRIBE.

It moved around tree across street. That is when it stopped and changed direction

15. DRAW A PICTURE THAT WILL SHOW THE SHAPE OF THE PHENOMENON. INCLUDE AND LABEL ANY DETAILS THAT MIGHT HAVE APPEARED AS WINGS OR PROTRUSIONS, AND INDICATE EXHAUST OR VAPOR TRAILS. INDICATE BY AN ARROW THE DIRECTION THE PHENOMENON WAS MOVING.



16. WHAT WAS THE ANGULAR SIZE? HOLD A MATCH AT ARM'S LENGTH IN FRONT OF A KNOWN OBJECT, SUCH AS A STREET LAMP OR THE MOON. NOTE HOW MUCH OF THE OBJECT IS COVERED BY THE HEAD OF THE MATCH. NOW IF YOU HAD BEEN ABLE TO PERFORM THIS EXPERIMENT AT THE TIME OF THE SIGHTING, ESTIMATE WHAT FRACTION OF THE PHENOMENON WOULD HAVE BEEN COVERED BY THE MATCH HEAD.

A circle
at first when it was over head all of it. As
it passed in front of me, about 1/2 to 3/4.

17. DID YOU OBSERVE THE PHENOMENON THROUGH ANY OF THE FOLLOWING? INCLUDE INFORMATION ON MODEL, TYPE, FILTER, LENS PRESCRIPTION OR OTHER APPLICABLE DATA.

	EYEGLASSES		CAMERA VIEWER
	SUNGLASSES	✓	BINOCULARS Stellar 7x50
	WINDSHIELD		TELESCOPE
	SIDE WINDOW OF VEHICLE		THEODOLITE
	WINDOWPANE		OTHER

A. DO YOU ORDINARILY WEAR GLASSES? ☐ YES ☐ NO

B. DO YOU USE READING GLASSES? ☑ YES ☐ NO

18. WHAT WAS YOUR IMPRESSION OF THE SPEED OF THE PHENOMENON? GIVE ESTIMATE OF SPEED Over 200 mph

19. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE PHENOMENON? GIVE ESTIMATE OF DISTANCE _____

20. IN ORDER THAT WE MAY OBTAIN AS CLEAR A PICTURE AS POSSIBLE OF WHAT YOU SAW, DESCRIBE IN YOUR OWN WORDS A COMMON OBJECT OR OBJECTS WHICH, WHEN PLACED IN THE SKY, SIMILAR TO WHERE YOU NOTED THE PHENOMENON, WOULD BEAR SOME RESEMBLANCE TO WHAT YOU SAW. DESCRIBE SIMILARITIES AND DIFFERENCES BETWEEN THE COMMON OBJECT AND WHAT YOU SAW.

21. DID YOU NOTICE ANY ODOR, NOISE, OR HEAT EMANATING FROM THE PHENOMENON OR ANY EFFECT ON YOURSELF, ANIMALS OR MACHINERY IN THE VICINITY? ☐ YES ☑ NO. IF "YES," DESCRIBE.

A. DID THE PHENOMENON DISTURB THE GROUND OR LEAVE ANY PHYSICAL EVIDENCE. ☐ YES ☑ NO. IF "YES," DESCRIBE.

22. HAVE YOU EVER SEEN THIS OR A SIMILAR PHENOMENON BEFORE? ☐ YES ☑ NO. IF "YES," GIVE DATE AND LOCATION.

23. WAS ANYONE WITH YOU AT THE TIME YOU SAW THE PHENOMENON? ☑ YES ☐ NO. IF "YES," DID THEY SEE IT TOO? ☑ YES ☐ NO.

A. LIST THEIR NAMES AND ADDRESSES

Miss [redacted]

[redacted]

Bristol Va. 24201

24. GIVE THE FOLLOWING INFORMATION ABOUT YOURSELF

LAST NAME, FIRST NAME, MIDDLE NAME [redacted]

ADDRESS (Street, City, State and Zip Code) [redacted] Bristol Virginia 24201

TELEPHONE (Area code and number)	AGE		MALE		FEMALE
[redacted]	14	✓			

INDICATE ADDITIONAL INFORMATION INCLUDING OCCUPATION AND ANY EXPERIENCE WHICH MAY BE PERTINENT.

Student at John S. Battle High

25. WHEN AND TO WHOM DID YOU REPORT THAT YOU HAD SIGHTED THIS PHENOMENON?

NAME Lt Colonel DAY 29 MONTH August YEAR 1968

26. DATE YOU COMPLETED THIS QUESTIONNAIRE.

DAY 3 MONTH November YEAR 1968

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

REPLY TO ATTN OF: TDPT (UFO)

SUBJECT: UFO Observation , 29 August 1968

18 SEP 1968

TO: [redacted]
Bristol, Virginia 24201

Your name has been given to the Aerial Phenomena Office (Project Blue Book) as being a witness to an unidentified flying object. If you were a witness to an UFO sighting on 29 August 1968 would you please complete the attached AF Form 117 and return it in the envelope provided. If you were not a witness to this sighting, would you please make a statement to this effect on the attached form. The information which you provide will be used in evaluating this observation. Thank you for your assistance in this matter.

HECTOR QUINTANILLA, Jr', Lt Colonel, USAF
Chief, Aerial Phenomena Office
Aerospace Technologies Division
Production Directorate

1 Atch
AF Form 117 w/envelope

Duty Officer Log, record on TDPT (ufo) on 3 Sept 68

AFR 80-17(C1)

SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE

BUDGET BUREAU APPROVAL NUMBER 21-R258

THIS QUESTIONNAIRE HAS BEEN PREPARED SO THAT YOU CAN GIVE THE U.S. AIR FORCE AS MUCH INFORMATION AS POSSIBLE CONCERNING THE UNIDENTIFIED PHENOMENON THAT YOU HAVE OBSERVED. PLEASE TRY TO ANSWER ALL OF THE QUESTIONS. THE INFORMATION YOU GIVE WILL BE USED FOR RESEARCH PURPOSES YOUR NAME WILL NOT BE USED IN CONNECTION WITH ANY OF YOUR STATEMENTS OR CONCLUSIONS WITHOUT YOUR PERMISSION. RETURN TO AIR FORCE BASE INVESTIGATOR FOR FORWARDING TO FTD (TDETR), WRIGHT-PATTERSON AFB, OHIO 45433, IAW AFR 80-17. *(IF ADDITIONAL SHEETS ARE NEEDED FOR NARRATIVE OR SKETCHES ATTACH SECURELY TO THIS FORM OR ANNOTATE WITH YOUR NAME FOR IDENTIFICATION.)*

1. WHEN DID YOU SEE THE PHENOMENON? DAY 29 MONTH AUG YEAR 68

2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON? HOUR 9 MINUTES 45 [ ] A.M. [X] P.M.

3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON? HOUR 9 MINUTES 45 [ ] A.M. [X] P.M.

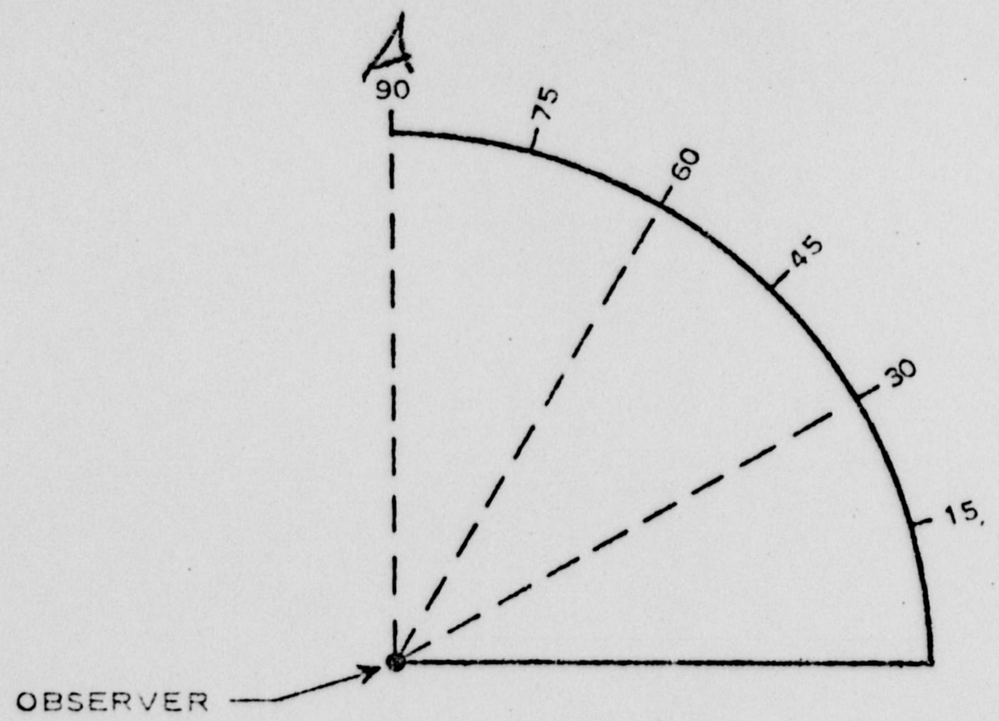
4. TIME ZONE [X] DAYLIGHT SAVINGS [ ] STANDARD
[X] EASTERN [ ] CENTRAL [ ] MOUNTAIN [ ] PACIFIC [ ] OTHER

5. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? IF IN CITY, GIVE THE NEAREST STREET ADDRESS AND INDICATE ON A HAND DRAWN MAP WHERE YOU WERE STANDING WITH REFERENCE TO THE ADDRESS. IF IN THE COUNTRY, IDENTIFY THE HIGHWAY YOU WERE ON OR NEAR AND TRY TO FIX A DISTANCE AND DIRECTION FROM SOME RECOGNIZABLE LANDMARK.

[redacted] LANE
BRISTOL, VA

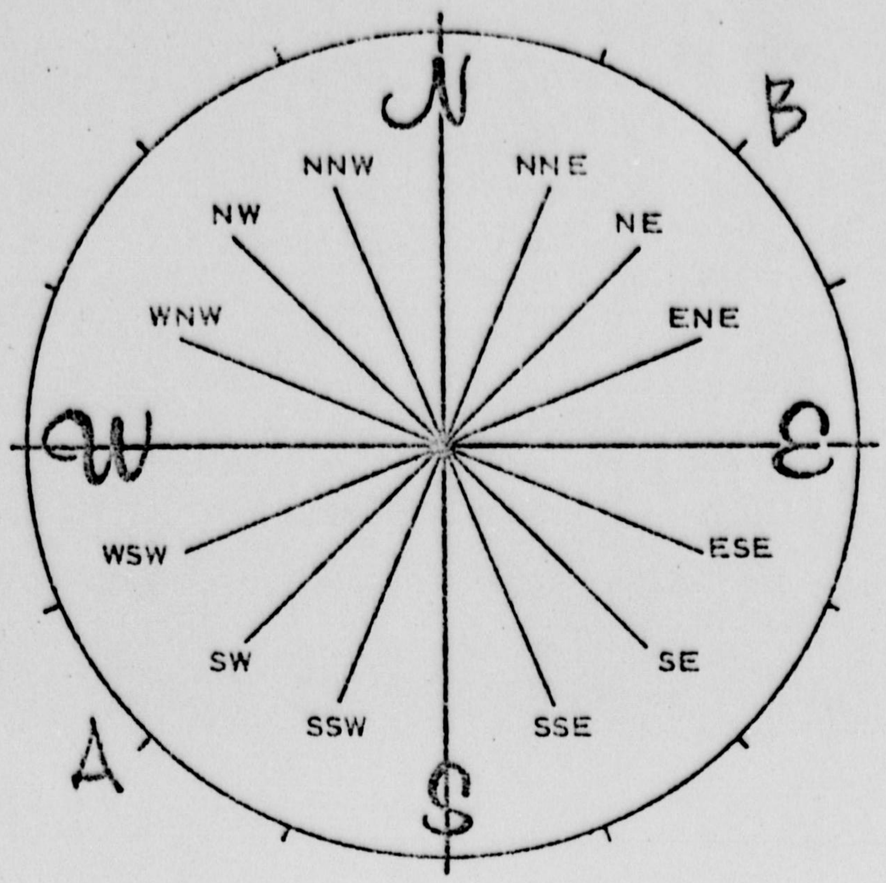
FRONT YARD

6. IMAGINE YOU ARE AT THE POINT SHOWN IN THE SKETCH, PLACE AN "A" ON THE CURVED LINE TO SHOW HOW HIGH THE PHENOMENON WAS ABOVE THE HORIZON, OR SKYLINE, WHEN FIRST SEEN. PLACE A "B" ON THE SAME CURVED LINE TO SHOW HOW HIGH ABOVE THE HORIZON THE PHENOMENON WAS WHEN LAST SEEN.

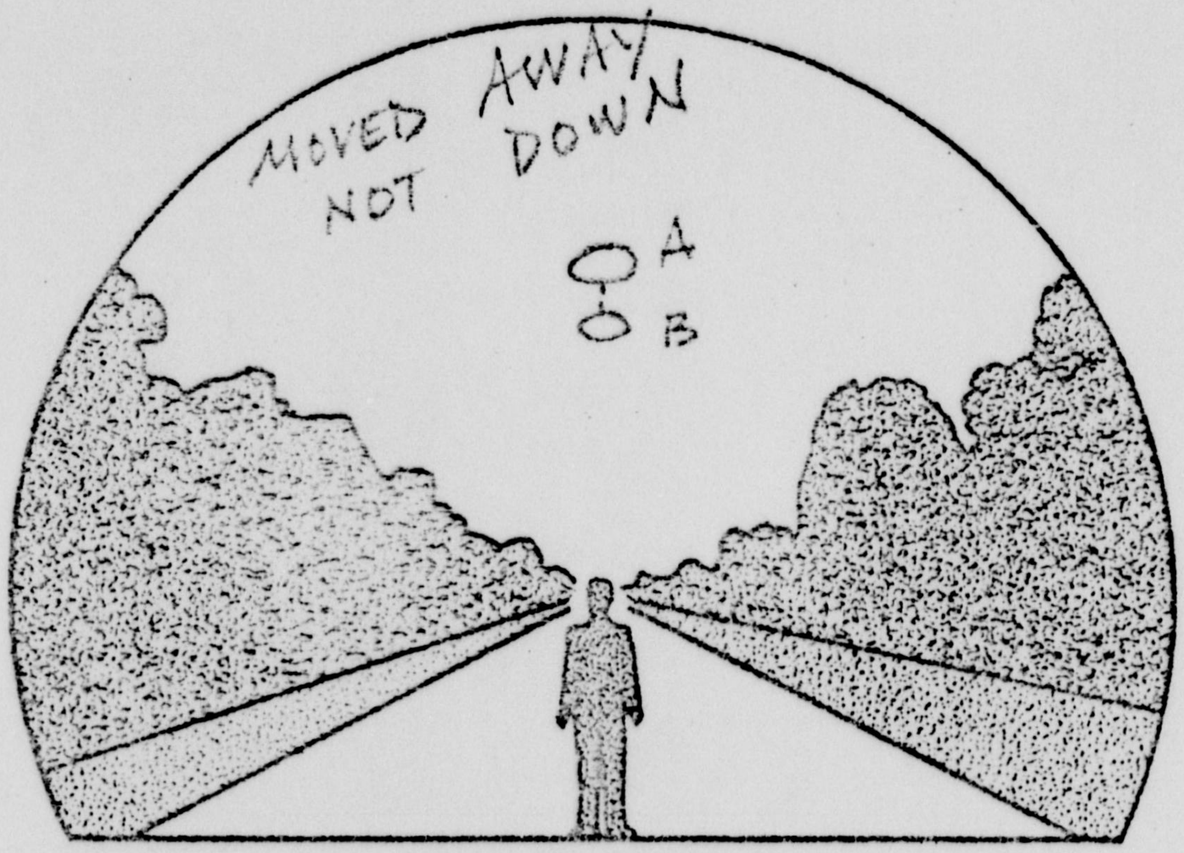


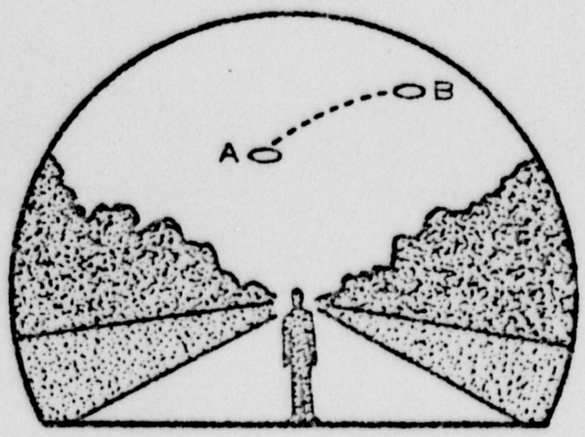
AF FORM AUG 67 117

6A. NOW IMAGINE YOU ARE AT THE CENTER OF THE COMPASS ROSE. PLACE AN "A" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN FIRST SEEN. PLACE A "B" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN LAST SEEN.



7. IN THE SKETCH BELOW, PLACE AN "A" AT THE POSITION OF THE PHENOMENON WHEN FIRST SEEN, AND A "B" AT THE POSITION OF THE PHENOMENON WHEN LAST SEEN. CONNECT THE "A" AND "B" WITH A LINE TO APPROXIMATE THE MOVEMENT OF THE PHENOMENON BETWEEN "A" AND "B". THAT IS, SCHEMATICALLY SHOW WHETHER THE MOVEMENT APPEARED TO BE STRAIGHT, CURVED OR ZIG-ZAG. REFER TO SMALLER SKETCH AS AN EXAMPLE OF HOW TO COMPLETE THE LARGER SKETCH.





Duty Officer Log, record on TDPT (ufo) on 3 Sept 68.

AFR 80-17(C1)

SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE	BUDGET BUREAU APPROVAL NUMBER 21-R258

THIS QUESTIONNAIRE HAS BEEN PREPARED SO THAT YOU CAN GIVE THE U.S. AIR FORCE AS MUCH INFORMATION AS POSSIBLE CONCERNING THE UNIDENTIFIED PHENOMENON THAT YOU HAVE OBSERVED. PLEASE TRY TO ANSWER ALL OF THE QUESTIONS. THE INFORMATION YOU GIVE WILL BE USED FOR RESEARCH PURPOSES YOUR NAME WILL NOT BE USED IN CONNECTION WITH ANY OF YOUR STATEMENTS OR CONCLUSIONS WITHOUT YOUR PERMISSION. RETURN TO AIR FORCE BASE INVESTIGATOR FOR FORWARDING TO FTD (TDETR), WRIGHT-PATTERSON AFB, OHIO 45433, IAW AFR 80-17. *(IF ADDITIONAL SHEETS ARE NEEDED FOR NARRATIVE OR SKETCHES ATTACH SECURELY TO THIS FORM OR ANNOTATE WITH YOUR NAME FOR IDENTIFICATION.)*

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3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON? HOUR 9 MINUTES 45 [ ] A.M. [X] P.M.

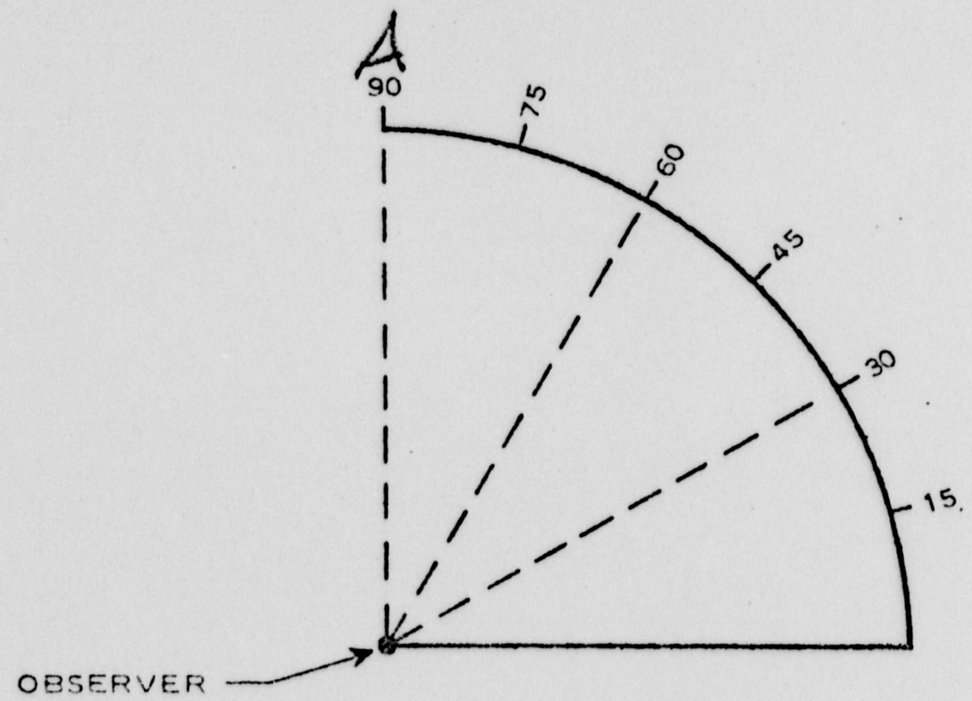
4. TIME ZONE [✓] DAYLIGHT SAVINGS [ ] STANDARD
[✓] EASTERN [ ] CENTRAL [ ] MOUNTAIN [ ] PACIFIC [ ] OTHER

5. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? IF IN CITY, GIVE THE NEAREST STREET ADDRESS AND INDICATE ON A HAND DRAWN MAP WHERE YOU WERE STANDING WITH REFERENCE TO THE ADDRESS. IF IN THE COUNTRY, IDENTIFY THE HIGHWAY YOU WERE ON OR NEAR AND TRY TO FIX A DISTANCE AND DIRECTION FROM SOME RECOGNIZABLE LANDMARK.

[redacted] LANE
BRISTOL, VA

FRONT YARD

5. IMAGINE YOU ARE AT THE POINT SHOWN IN THE SKETCH, PLACE AN "A" ON THE CURVED LINE TO SHOW HOW HIGH THE PHENOMENON WAS ABOVE THE HORIZON, OR SKYLINE, WHEN FIRST SEEN. PLACE A "B" ON THE SAME CURVED LINE TO SHOW HOW HIGH ABOVE THE HORIZON THE PHENOMENON WAS WHEN LAST SEEN.



AF FORM AUG 67 117

8. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? *(Check appropriate blocks.)*

✓	OUTDOORS		IN BUSINESS SECTION OF CITY
	IN BUILDING	✓	IN RESIDENTIAL SECTION OF CITY
	IN CAR ☐ AS DRIVER ☐ AS PASSENGER		IN OPEN COUNTRYSIDE
	IN BOAT	✓	NEAR AIRFIELD 12 MI.
	IN AIRPLANE ☐ AS PILOT ☐ AS PASSENGER		FLYING OVER CITY
	OTHER		FLYING OVER OPEN COUNTRY
			OTHER

A. IF YOU WERE IN A VEHICLE, COMPLETE THE FOLLOWING:

WHAT DIRECTION WERE YOU MOVING?

	NORTH		EAST
	SOUTH		WEST
	NORTHEAST		SOUTHEAST
	NORTHWEST		SOUTHWEST

HOW FAST WERE YOU MOVING?

DID YOU STOP ANYTIME WHILE OBSERVING THE PHENOMENON? ☐ YES ☐ NO

EXPLAIN WHETHER SUCH MOVEMENT AFFECTS YOUR SKETCHES IN ITEMS 5 AND 6.

DESCRIBE TYPE OF VEHICLE YOU WERE IN AND TYPE OF ROAD, TERRAIN OR BODY OF WATER YOU TRAVERSED DURING THE SIGHTING. STATE WHETHER WINDOWS OR CONVERTIBLE TOP WERE UP OR DOWN.

HOW MUCH OTHER TRAFFIC WAS THERE?

DID YOU NOTICE ANY AIRPLANES? ☐ YES ☐ NO. IF "YES," DESCRIBE WHEN THEY WERE IN SIGHT RELATIVE TO THE TIME OF SIGHTING THE PHENOMENON AND WHERE THEY WERE IN THE SKY RELATIVE TO THE POSITION OF THE PHENOMENON.

9. HOW LONG WAS THE PHENOMENON IN SIGHT?

LENGTH OF TIME 1 MIN.	✓	CERTAIN OF TIME		NOT VERY SURE
		FAIRLY CERTAIN		JUST A GUESS

HOW WAS TIME DETERMINED? ESTIMATE

WAS THE PHENOMENON IN SIGHT CONTINUOUSLY? ☐ YES ☐ NO. IF "NO," INDICATE WHETHER THIS IS DUE TO YOUR MOVEMENT OR THE BEHAVIOR OF THE PHENOMENON, AND DESCRIBE SUCH MOVEMENT OR BEHAVIOR. INDICATE DISAPPEARANCES ON PREVIOUS SKETCHES.

LOST IN GLARE OF STREET LIGHT BEHIND TREE FOR COUPLE OF SECONDS.

10. IF THERE WERE MORE THAN ONE PHENOMENON, HOW MANY WERE THERE? DRAW A PICTURE TO SHOW HOW THEY WERE ARRANGED. DID THIS ARRANGEMENT CHANGE DURING THE SIGHTING?

11. CONDITIONS *(Check appropriate blocks.)*

A. SKY		B. WEATHER			
	DAY		CUMULUS CLOUDS *(Low fluffy)*		FOG OR MIST
	TWILIGHT		CIRRUS CLOUDS *(High fleecy or Herring-bone)*		HEAVY RAIN
✓	NIGHT				LIGHT RAIN OR DRIZZLE
✓	CLEAR		NIMBUS CLOUDS *(Rain)*		HAIL
	PARTLY CLOUDY		CUMULONIMBUS CLOUDS *(Thunderstorms)*		SNOW OR SLEET
	COMPLETELY OVERCAST				UNKNOWN
			HAZE OR SMOG		NONE OF THE ABOVE

C. IF THE SIGHTING WAS AT TWILIGHT OR NIGHT, WHAT DID YOU NOTICE ABOUT THE STARS AND MOON?

(1) STARS		(2) MOON			
	NONE		BRIGHT MOONLIGHT	✓	NO MOONLIGHT
	A FEW		MOON WITH HALO		UNKNOWN
✓	MANY		MOON HIDDEN BY CLOUDS		
	UNKNOWN		PARTIAL *(New or quarter)*		

D. IF SIGHTING WAS IN DAYLIGHT, WAS THE SUN VISIBLE? ☐ YES ☐ NO. IF "YES," WHERE WAS THE SUN AS YOU FACED THE PHENOMENON?

	IN FRONT OF YOU		TO YOUR RIGHT		OVERHEAD *(Near noon)*
	IN BACK OF YOU		TO YOUR LEFT		UNKNOWN

E. SPECIFY THE MAJOR SOURCE OF ILLUMINATION PRESENT DURING THE SIGHTING, SUCH AS THE SUN, HEADLIGHTS OR STREET LAMP, ETC. FOR TERRESTRIAL ILLUMINATION, SPECIFY DISTANCE TO LIGHT SOURCE.

STARS

12. GIVE A BRIEF DESCRIPTION OF THE PHENOMENON, INDICATING WHETHER IT APPEARED DARK OR LIGHT, WHETHER IT REFLECTED LIGHT OR WAS SELF-LUMINOUS AND WHAT COLORS YOU NOTICED. DESCRIBE YOUR IMPRESSION OF WHETHER IT WAS SOLID OR TRANSPARENT, WHETHER EDGES WERE SHARP OR FUZZY. DESCRIBE THE SHAPE OR INDICATE IF IT APPEARED AS A POINT OF LIGHT. INDICATE COMPARISONS WITH OTHER OBSERVED OBJECTS, LIKE STARS, A LIGHT OR OTHER OBJECT IN YOUR FIELD OF VIEW.

LIGHT
SELF-LUMINOUS
6/8/10 RED LIGHTS ON BOTTOM
(VERY BRIGHT) REVOLVING AROUND CENTER

SOLID
LIGHT HID EDGES
CIRCULAR

13. DID THE PHENOMENON	YES	NO	UNKNOWN
MOVE IN A STRAIGHT LINE?		✓	
STAND STILL AT ANYTIME?	✓		
SUDDENLY SPEED UP AND RUN AWAY? LIKE CAR CHANGING GEARS	✓		
BREAK UP IN PARTS AND EXPLODE?		✓	
CHANGE COLOR?		✓	
GIVE OFF SMOKE?		✓	
CHANGE BRIGHTNESS?		✓	
CHANGE SHAPE?		✓	
FLASH OR FLICKER?		✓	
DISAPPEAR AND REAPPEAR?		✓	
SPIN LIKE A TOP? LIGHTS REVOLVED	✓		
MAKE A NOISE?		✓	
FLUTTER OR WOBBLE?		✓	

14. WHAT DREW YOUR ATTENTION TO THE PHENOMENON?

LOOKING AT STARS AND SAW IT.

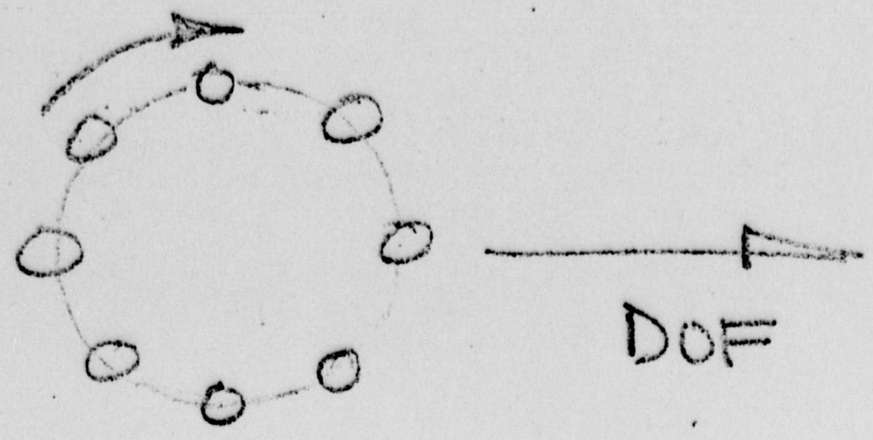
A. HOW DID IT FINALLY DISAPPEAR?

COULDN'T SEE ANY MORE

B. DID THE PHENOMENON MOVE BEHIND OR IN FRONT OF SOMETHING, LIKE A CLOUD, TREE, OR BUILDING AT ANY TIME?
☑ YES ☐ NO. IF "YES," DESCRIBE.

BEHIND TREE FOR MOMENT

15. DRAW A PICTURE THAT WILL SHOW THE SHAPE OF THE PHENOMENON. INCLUDE AND LABEL ANY DETAILS THAT MIGHT HAVE APPEARED AS WINGS OR PROTRUSIONS, AND INDICATE EXHAUST OR VAPOR TRAILS. INDICATE BY AN ARROW THE DIRECTION THE PHENOMENON WAS MOVING.



16. WHAT WAS THE ANGULAR SIZE? HOLD A MATCH AT ARM'S LENGTH IN FRONT OF A KNOWN OBJECT, SUCH AS A STREET LAMP OR THE MOON. NOTE HOW MUCH OF THE OBJECT IS COVERED BY THE HEAD OF THE MATCH. NOW IF YOU HAD BEEN ABLE TO PERFORM THIS EXPERIMENT AT THE TIME OF THE SIGHTING, ESTIMATE WHAT FRACTION OF THE PHENOMENON WOULD HAVE BEEN COVERED BY THE MATCH HEAD.

1/4 TO 1/2

17. DID YOU OBSERVE THE PHENOMENON THROUGH ANY OF THE FOLLOWING? INCLUDE INFORMATION ON MODEL, TYPE, FILTER, LENS PRESCRIPTION OR OTHER APPLICABLE DATA.

	EYEGLASSES		CAMERA VIEWER
	SUNGLASSES	✓	BINOCULARS STELLAR 4X40
	WINDSHIELD		TELESCOPE
	SIDE WINDOW OF VEHICLE		THEODOLITE
	WINDOWPANE		OTHER

A. DO YOU ORDINARILY WEAR GLASSES? ☐ YES ☑ NO

B. DO YOU USE READING GLASSES? ☑ YES ☐ NO

18. WHAT WAS YOUR IMPRESSION OF THE SPEED OF THE PHENOMENON? GIVE ESTIMATE OF SPEED 100-200 MPH

19. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE PHENOMENON? GIVE ESTIMATE OF DISTANCE ?.

20. IN ORDER THAT WE MAY OBTAIN AS CLEAR A PICTURE AS POSSIBLE OF WHAT YOU SAW, DESCRIBE IN YOUR OWN WORDS A COMMON OBJECT OR OBJECTS WHICH, WHEN PLACED IN THE SKY, SIMILAR TO WHERE YOU NOTED THE PHENOMENON, WOULD BEAR SOME RESEMBLANCE TO WHAT YOU SAW. DESCRIBE SIMILARITIES AND DIFFERENCES BETWEEN THE COMMON OBJECT AND WHAT YOU SAW.

BOTTOM OF ONE PIECE TELEPHONE ONLY MORE ROUND.

21. DID YOU NOTICE ANY ODOR, NOISE, OR HEAT EMANATING FROM THE PHENOMENON OR ANY EFFECT ON YOURSELF, ANIMALS OR MACHINERY IN THE VICINITY? ☐ YES ☑ NO. IF "YES," DESCRIBE.

A. DID THE PHENOMENON DISTURB THE GROUND OR LEAVE ANY PHYSICAL EVIDENCE. ☐ YES ☑ NO. IF "YES," DESCRIBE.

22. HAVE YOU EVER SEEN THIS OR A SIMILAR PHENOMENON BEFORE? ☐ YES ☒ NO. IF "YES," GIVE DATE AND LOCATION.

23. WAS ANYONE WITH YOU AT THE TIME YOU SAW THE PHENOMENON? ☒ YES ☐ NO. IF "YES," DID THEY SEE IT TOO? ☐ YES ☐ NO.

A. LIST THEIR NAMES AND ADDRESSES

(1) [redacted] BRISTOL, VA.

(2) [redacted] SAME BRISTOL, VA.

24. GIVE THE FOLLOWING INFORMATION ABOUT YOURSELF

LAST NAME, FIRST NAME [redacted]

ADDRESS (Street, City, State [redacted], BRISTOL, VA. 24201

TELEPHONE (Area code and number) [redacted]	AGE 14	☒ MALE	☐ FEMALE

INDICATE ADDITIONAL INFORMATION INCLUDING OCCUPATION AND ANY EXPERIENCE WHICH MAY BE PERTINENT.

STUDENT

25. WHEN AND TO WHOM DID YOU REPORT THAT YOU HAD SIGHTED THIS PHENOMENON?

NAME TRI-CITIES AIRPORT DAY 29 MONTH AUG YEAR 68

26. DATE YOU COMPLETED THIS QUESTIONNAIRE.

DAY 29 MONTH AUG YEAR 68