

PROJECT 10073 RECORD

1. DATE - TIME GROUP November 68 2130	2. LOCATION Bronx, New York
3. SOURCE Civilian	10. CONCLUSION Other (CONFLICTING DATA)
4. NUMBER OF OBJECTS See Case	Observer originally stated that observation took place on 20 Nov 68, however, on his completed 117 he indicated that sighting
5. LENGTH OF OBSERVATION 5 Minutes	11. BRIEF SUMMARY AND ANALYSIS occurred on 21 Nov 68. SEE CASE
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE See Case	
8. PHOTOS <input type="checkbox"/> Yes XX No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes XX No	
JWS	
RETURN TO: Director Aerospace Studies Inst ATTN: Archives Branch Maxwell AFB, Alabama	

K243.6012-1
NOV 1968

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

90 Nov 68

DEPARTMENT OF THE AIR FORCE
WASHINGTON 20330



OFFICE OF THE SECRETARY

November 25, 1968

Dear [REDACTED]

This replies to your letter postmarked November 21, 1968, in which you described your sighting of an unidentified flying object (UFO).

Without additional information, we cannot offer an explanation of what you saw. However, if you will complete the inclosed questionnaire and mail it in the attached envelope, our technical people at Wright-Patterson Air Force Base, Ohio, will be able to investigate further and make an evaluation.

Should you ever see another UFO, please report it as soon as possible to the nearest Air Force base. Each base in the United States has a UFO investigator. He is in a better position to make an on-the-spot investigation, which usually results in a more accurate analysis.

In the meantime, you might be able to identify your sighting by looking at the categories of objects often reported as UFO's in the material we are sending.

Sincerely,

/s/

JAMES H. AIKMAN
Major, USAF
Chief, Civil Branch
Community Relations Division
Office of Information

Attachments

Mr. [REDACTED]

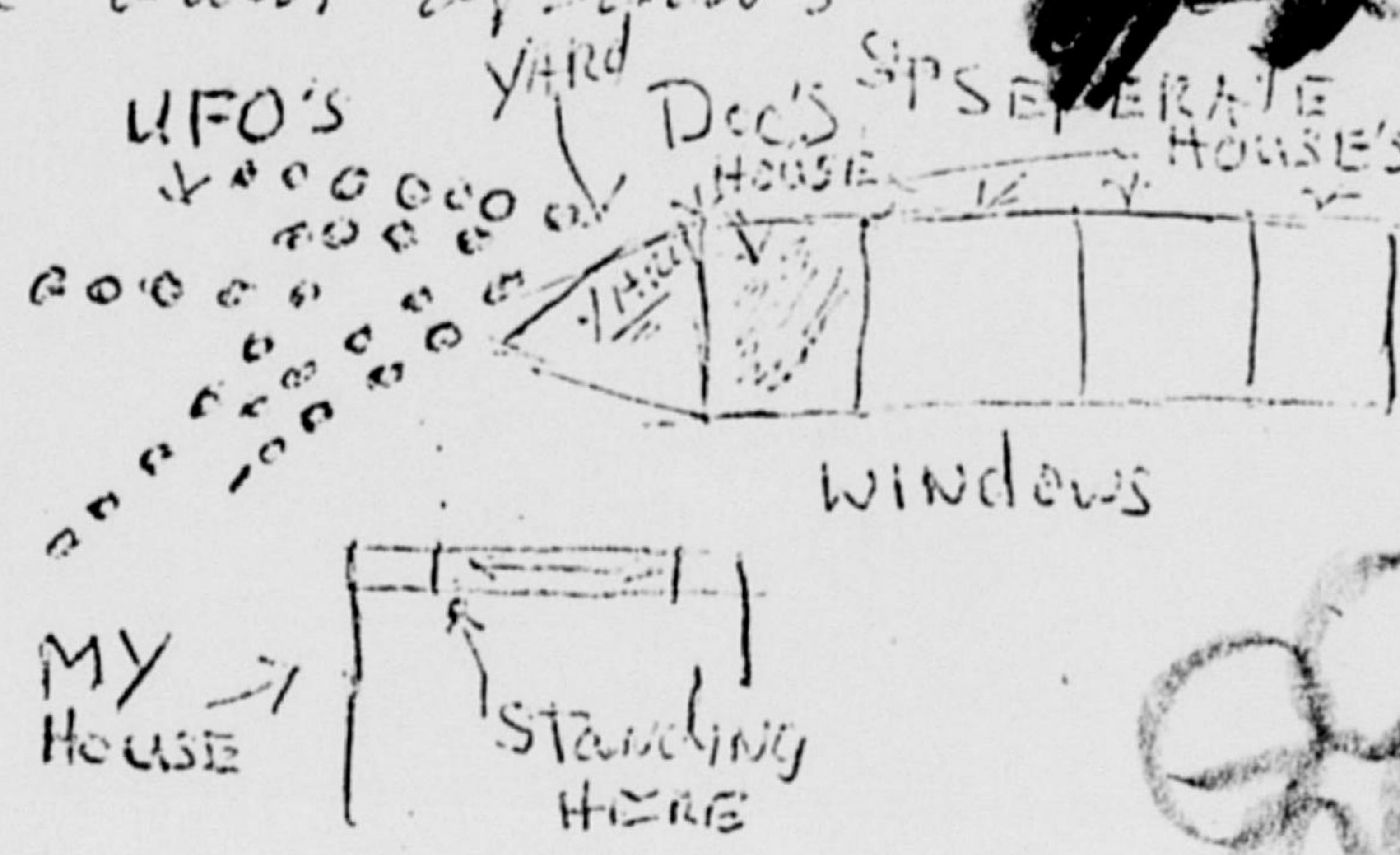
Bronx, New York 10469

1003810

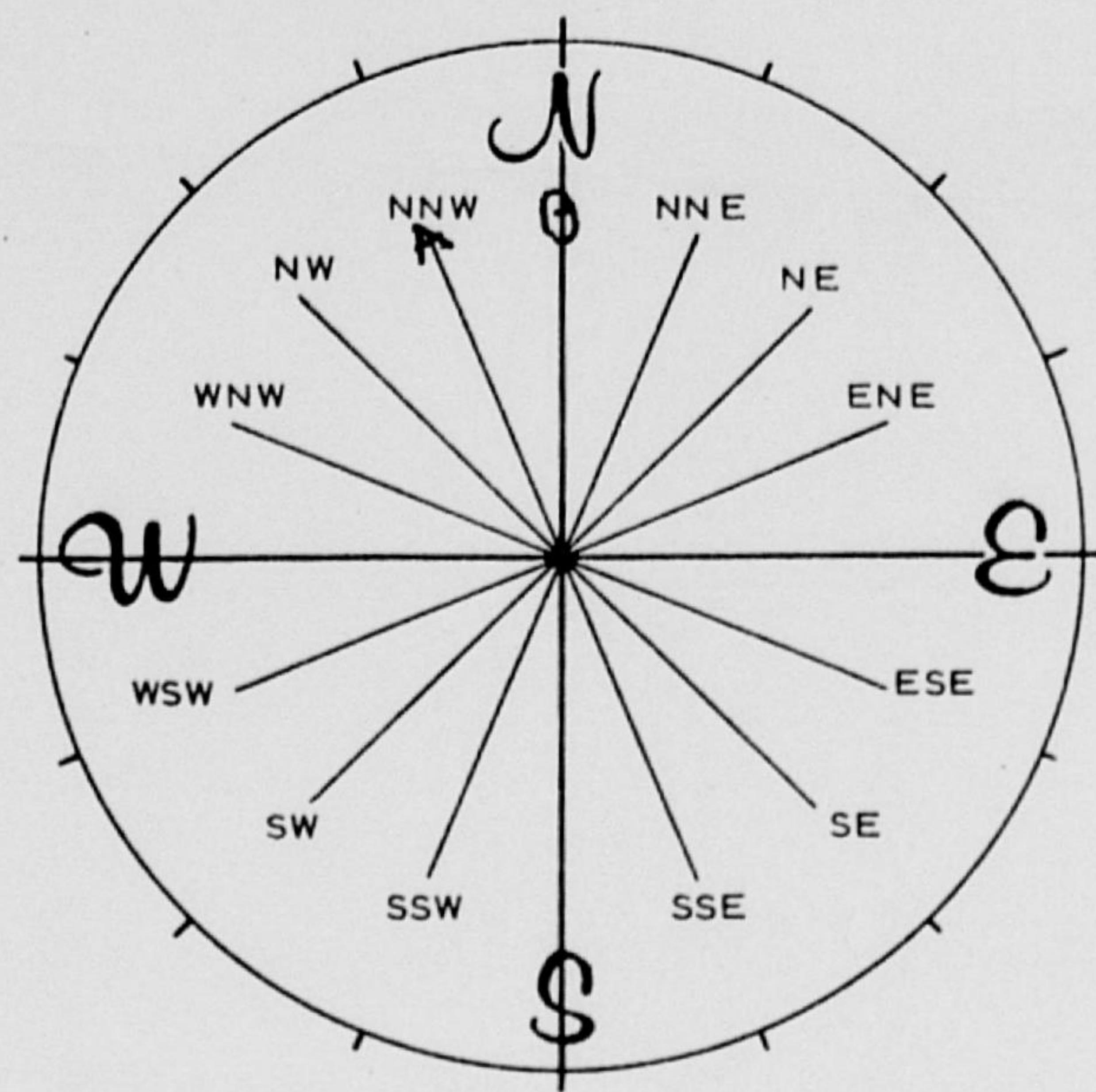
Dear Sirs
Bronx N.Y. 10469

Dear Sir:

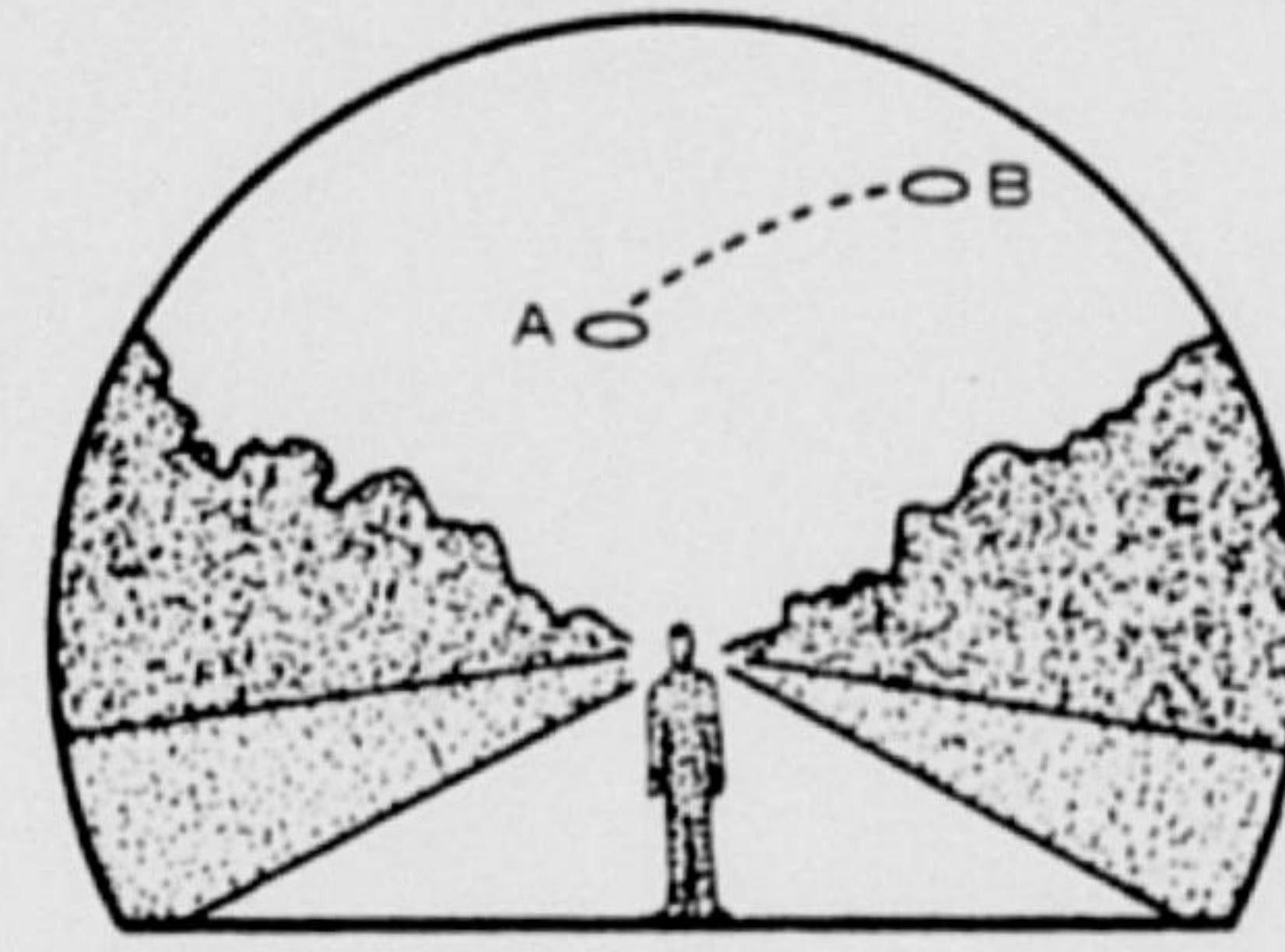
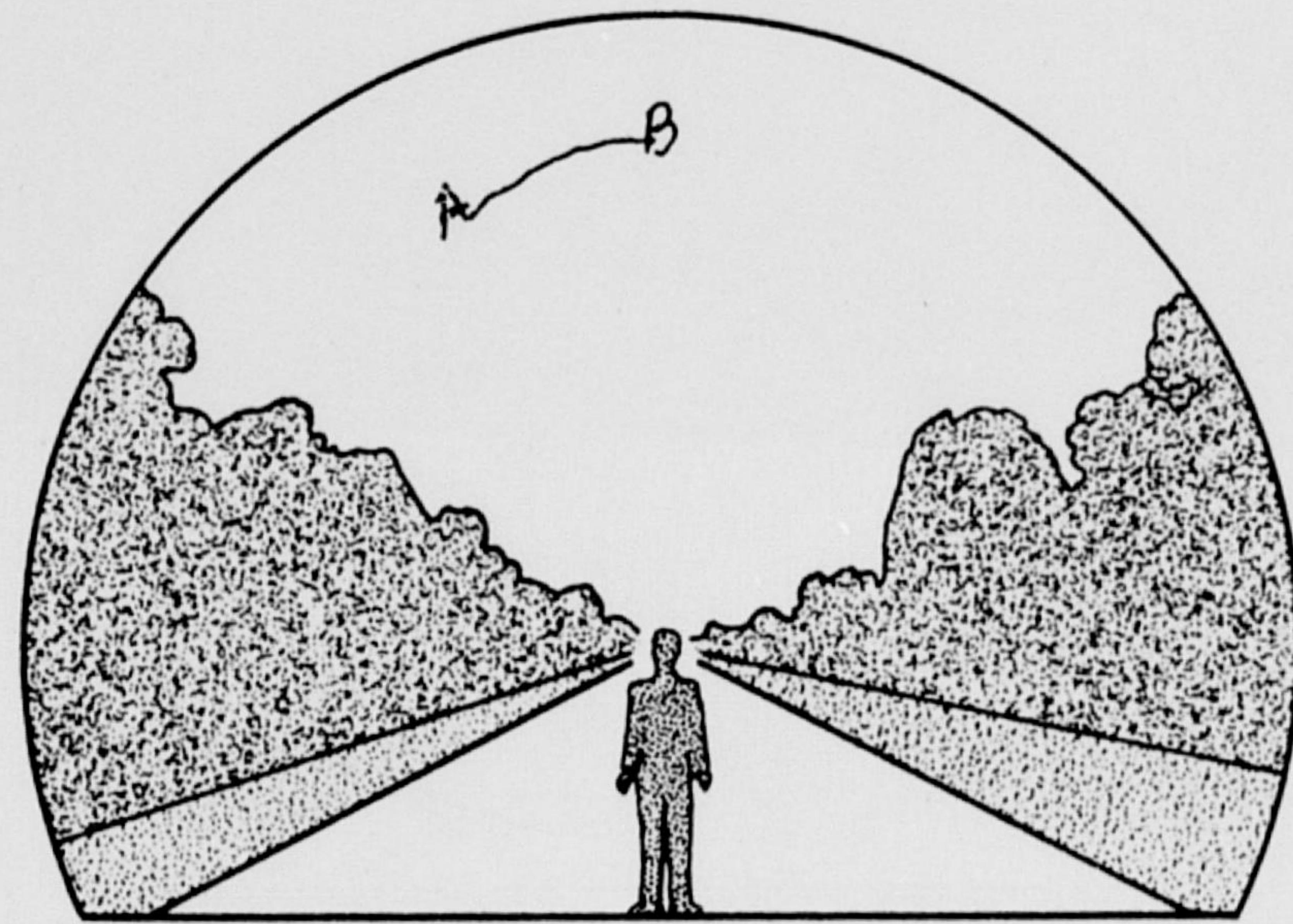
On November 20, 1968 I looked out my window at about 9:30 - 10:00 o'clock. As I looked around the sky, about twenty yellow lights flashed up, then about 3 seconds later about ten more flashed up. They were above yard. They were shaped and in the order of this:



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.



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 21 MONTH November YEAR 68

2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON?

HOUR 9 MINUTES 30 A.M. P.M.

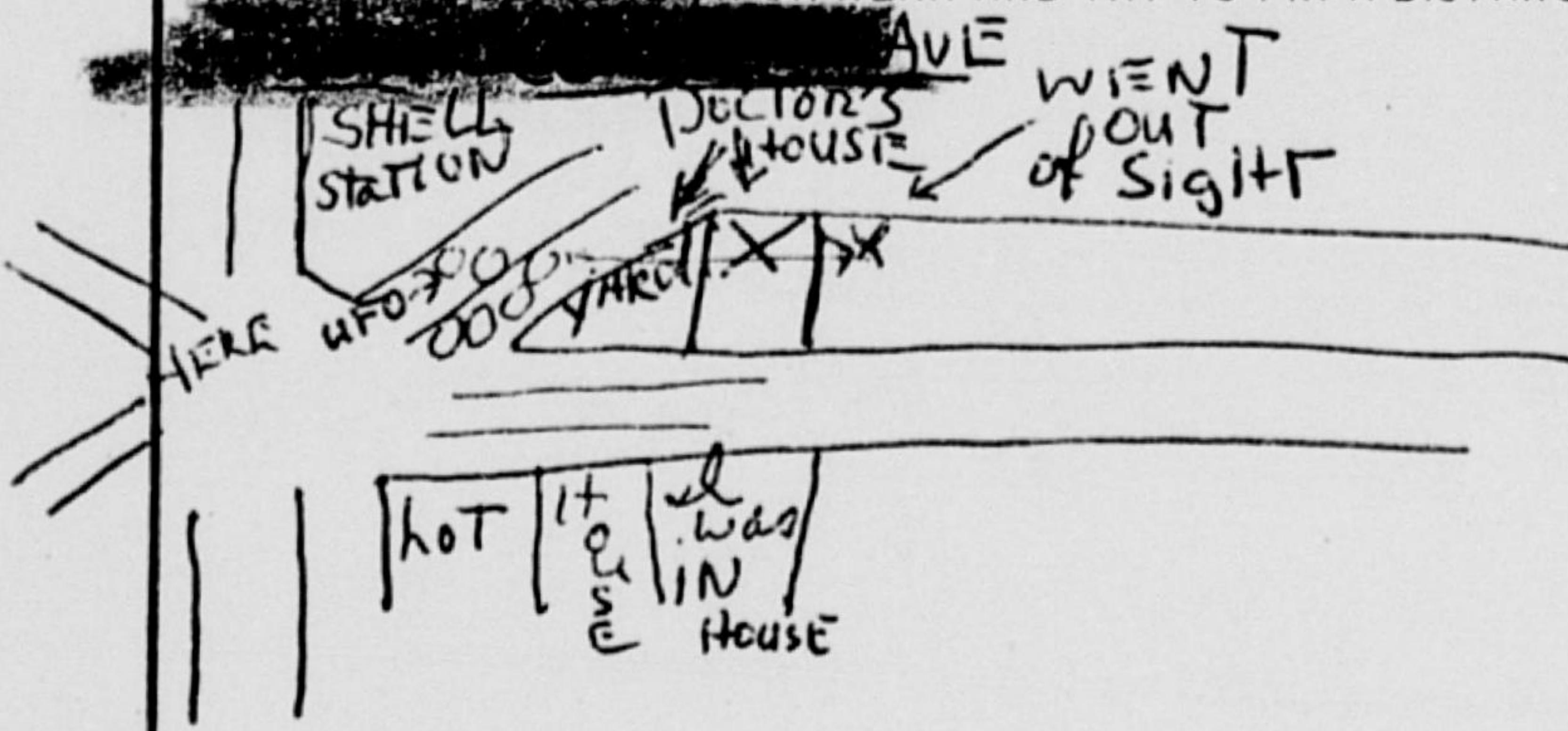
3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON?

HOUR 9 MINUTES 35 A.M. P.M.

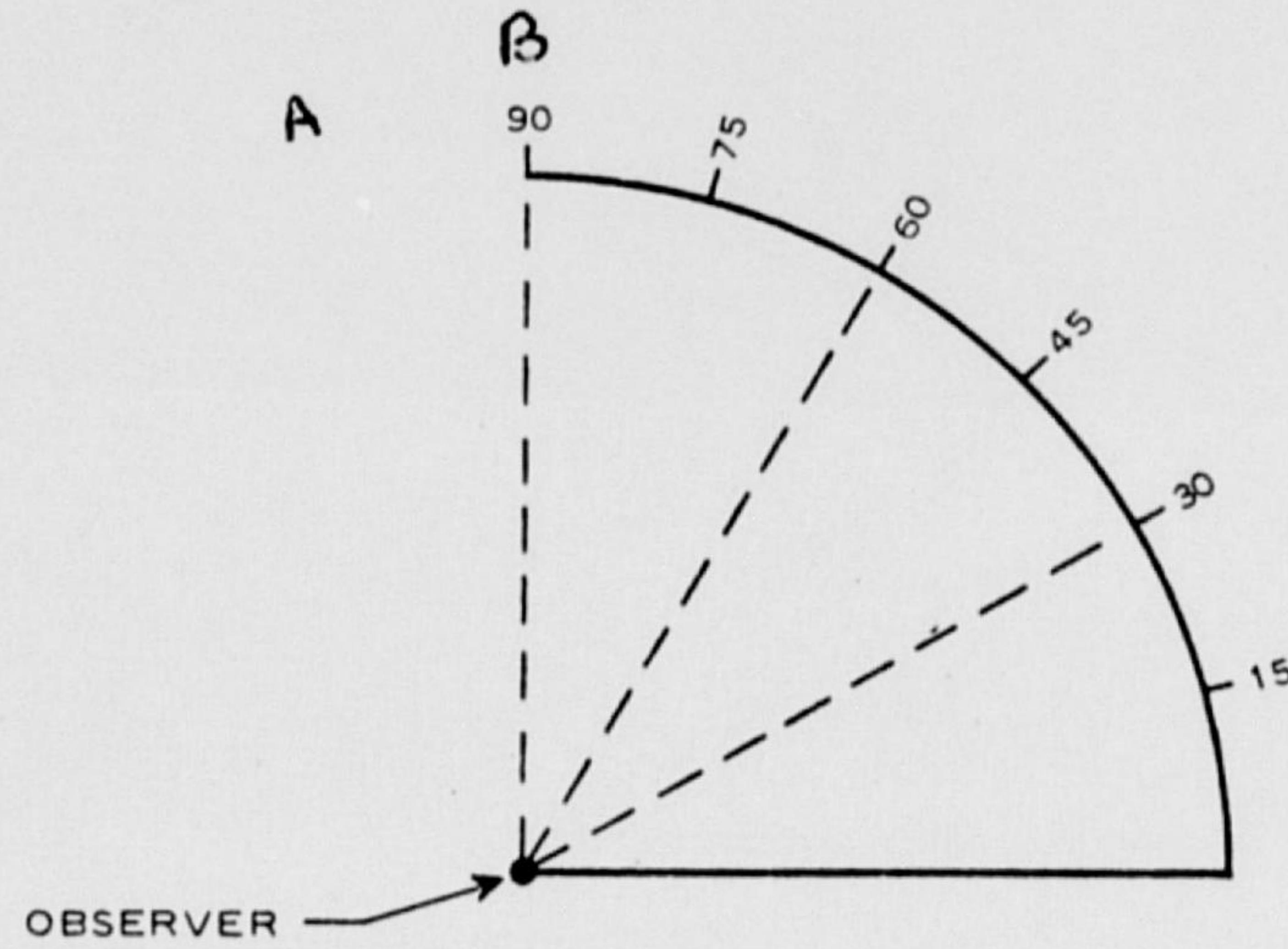
4. TIME/ZONE

 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.



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?

There was about 30. No they stayed in the same arrangement.



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	NIMBUS CLOUDS (Rain)	LIGHT RAIN OR DRIZZLE
	CLEAR	CUMULONIMBUS CLOUDS (Thunderstorms)	HAIL
	PARTLY CLOUDY		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

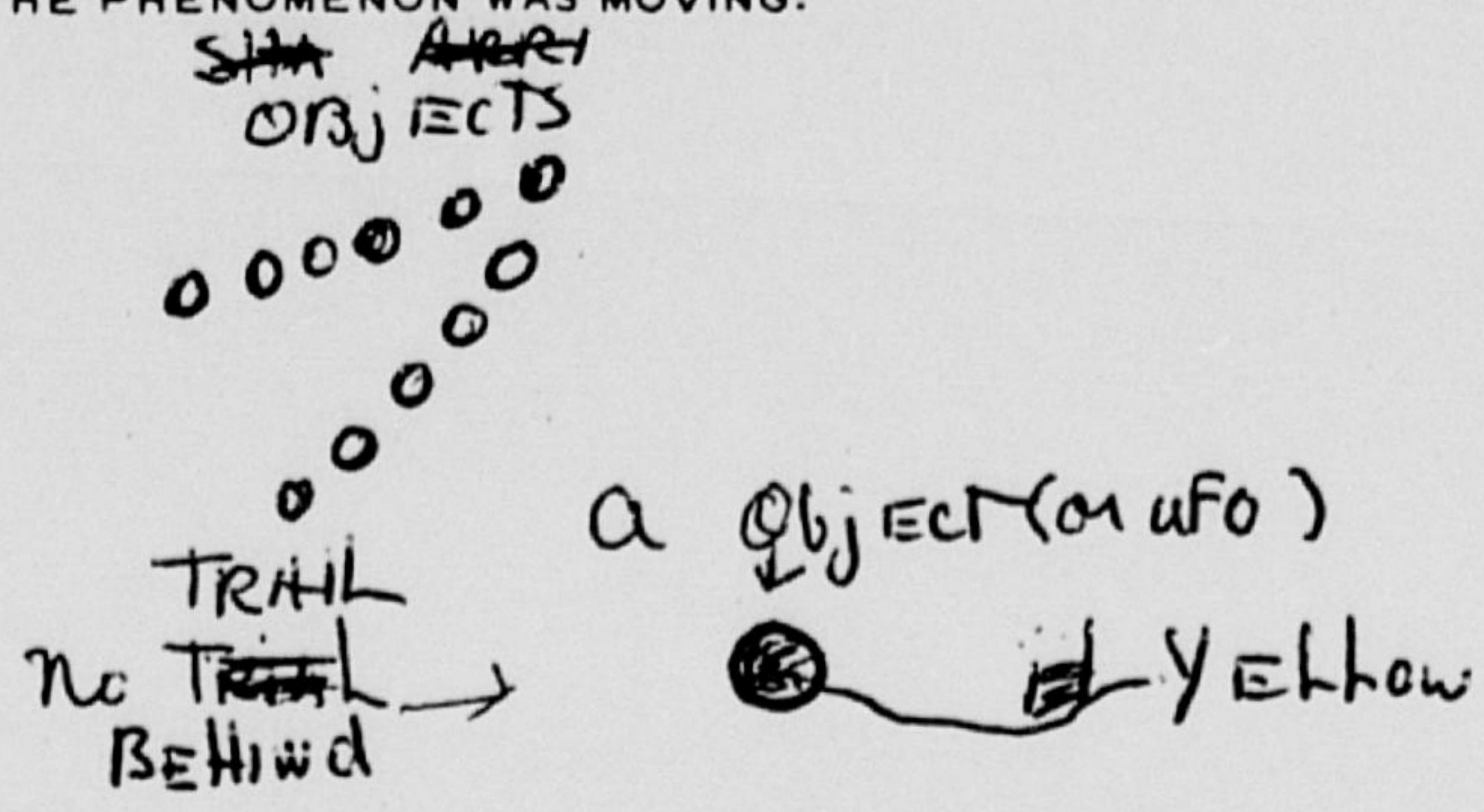
E. SPECIFY THE MAJOR SOURCE OF ILLUMINATION PRESENT DURING THE SIGHTING, SUCH AS THE SUN, HEADLIGHTS OR STREET LAMP, ETC. FOR TERRESTRIAL ILLUMINATION, SPECIFY DISTANCE TO LIGHT SOURCE.

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.

They were a round. They were a bright to yellow. It looked like a solid objects

8. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? (Check appropriate blocks.)					
OUTDOORS			IN BUSINESS SECTION OF CITY		
<input checked="" type="checkbox"/> IN BUILDING			IN RESIDENTIAL SECTION OF CITY		
IN CAR		<input type="checkbox"/> AS DRIVER	<input type="checkbox"/> AS PASSENGER	IN OPEN COUNTRYSIDE	
IN BOAT				NEAR AIRFIELD	
IN AIRPLANE		<input type="checkbox"/> AS PILOT	<input type="checkbox"/> AS PASSENGER	FLYING OVER CITY	
OTHER			FLYING OVER OPEN COUNTRY		
			<input checked="" type="checkbox"/> OTHER		
A. IF YOU WERE IN A VEHICLE, COMPLETE THE FOLLOWING:					
WHAT DIRECTION WERE YOU MOVING?			HOW FAST WERE YOU MOVING?		
<input checked="" type="checkbox"/> NORTH		EAST	FIRST Show, THEN it STOPed		
SOUTH		WEST	DID YOU STOP ANYTIME WHILE OBSERVING THE PHENOMENON?		
NORTHEAST		SOUTHEAST	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
NORTHWEST		SOUTHWEST			
EXPLAIN WHETHER SUCH MOVEMENT AFFECTS YOUR SKETCHES IN ITEMS 5 AND 6. <i>No it did not.</i>					
DESCRIBE TYPE OF VEHICLE YOU WERE IN AND TYPE OF ROAD, TERRAIN OR BODY OF WATER YOU TRAVESED DURING THE SIGHTING. STATE WHETHER WINDOWS OR CONVERTIBLE TOP WERE UP OR DOWN.					
HOW MUCH OTHER TRAFFIC WAS THERE?					
DID YOU NOTICE ANY AIRPLANES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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 <i>5 minutes</i>			CERTAIN OF TIME <input checked="" type="checkbox"/>	NOT VERY SURE <input type="checkbox"/> FAIRLY CERTAIN <input type="checkbox"/> JUST A GUESS	
HOW WAS TIME DETERMINED? <i>By my clock on the wall</i>					
WAS THE PHENOMENON IN SIGHT CONTINUOUSLY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> 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.					

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.

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

August 10, 1968

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

A. LIST THEIR NAMES AND ADDRESSES

24. GIVE THE FOLLOWING INFORMATION ABOUT YOURSELF

LAST NAME, FIRST NAME, MIDDLE NAME

(City, State and Zip Code)

10469

TELEPHONE (Area code and number)

AGE

13

/

MALE

FEMALE

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

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

NAME 8 Air Force - U.S. DAY 22 MONTH November YEAR 68

26. DATE YOU COMPLETED THIS QUESTIONNAIRE.

November

DAY 28 MONTH November YEAR 68

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
SUNGASSES	BINOCULARS
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 690 MPH

19. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE PHENOMENON? GIVE ESTIMATE OF DISTANCE 1 MILE up

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 objects were round, ~~shiny~~. There was no ~~trail~~ behind it. It was a bright yellow.

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.

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