

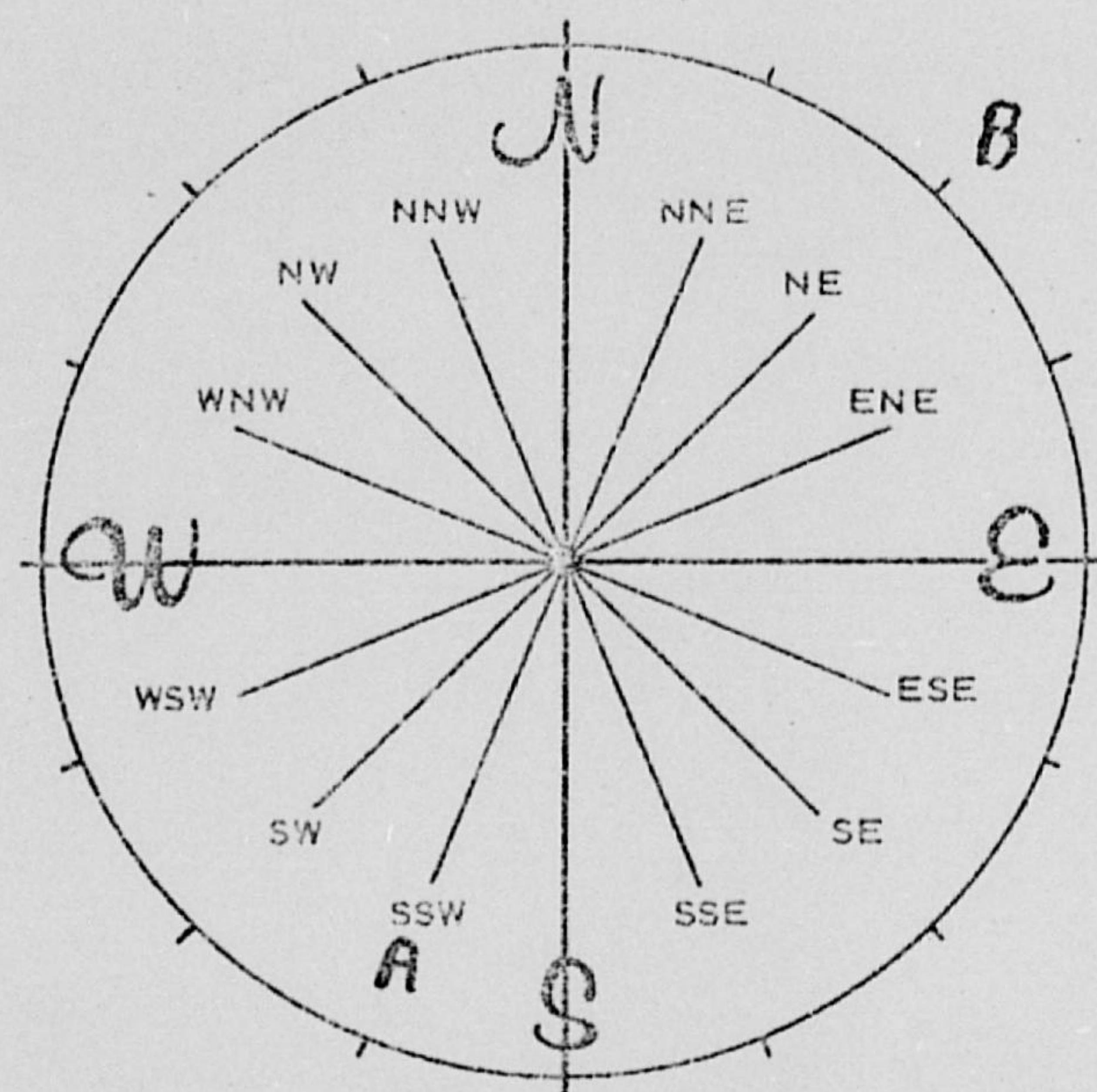
PROJECT 10073 RECORD

1. DATE - TIME GROUP 10/2000 10 Feb 69 11/0200Z	2. LOCATION St Louis, Missouri
3. SOURCE Civilian	10. CONCLUSION Astro (METEOR)
4. NUMBER OF OBJECTS One	
5. LENGTH OF OBSERVATION 4 Seconds	11. BRIEF SUMMARY AND ANALYSIS The observer sighted a yellow-pink-orange light that traveled from the NE to the SW and disappeared in about 4 seconds.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE SW	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

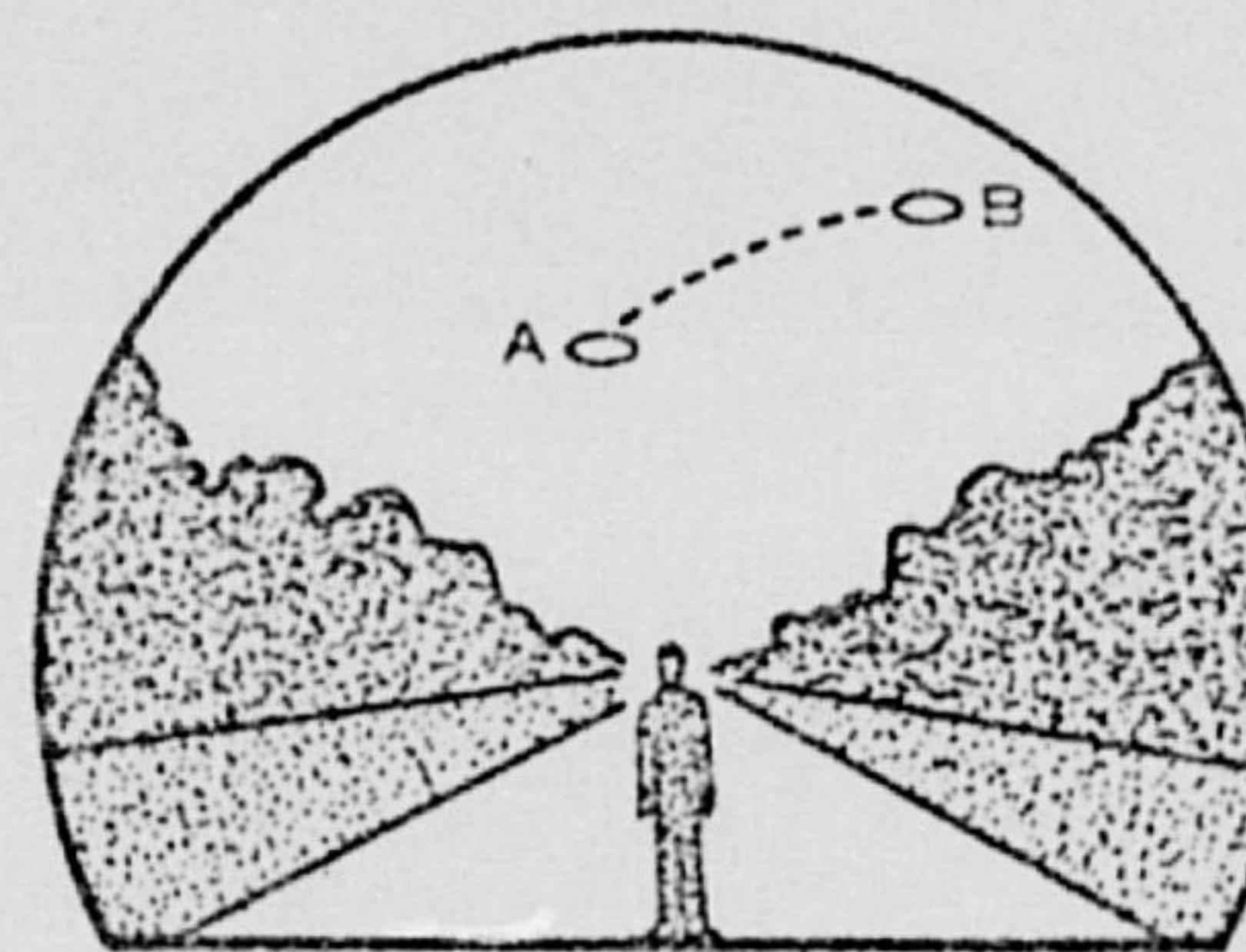
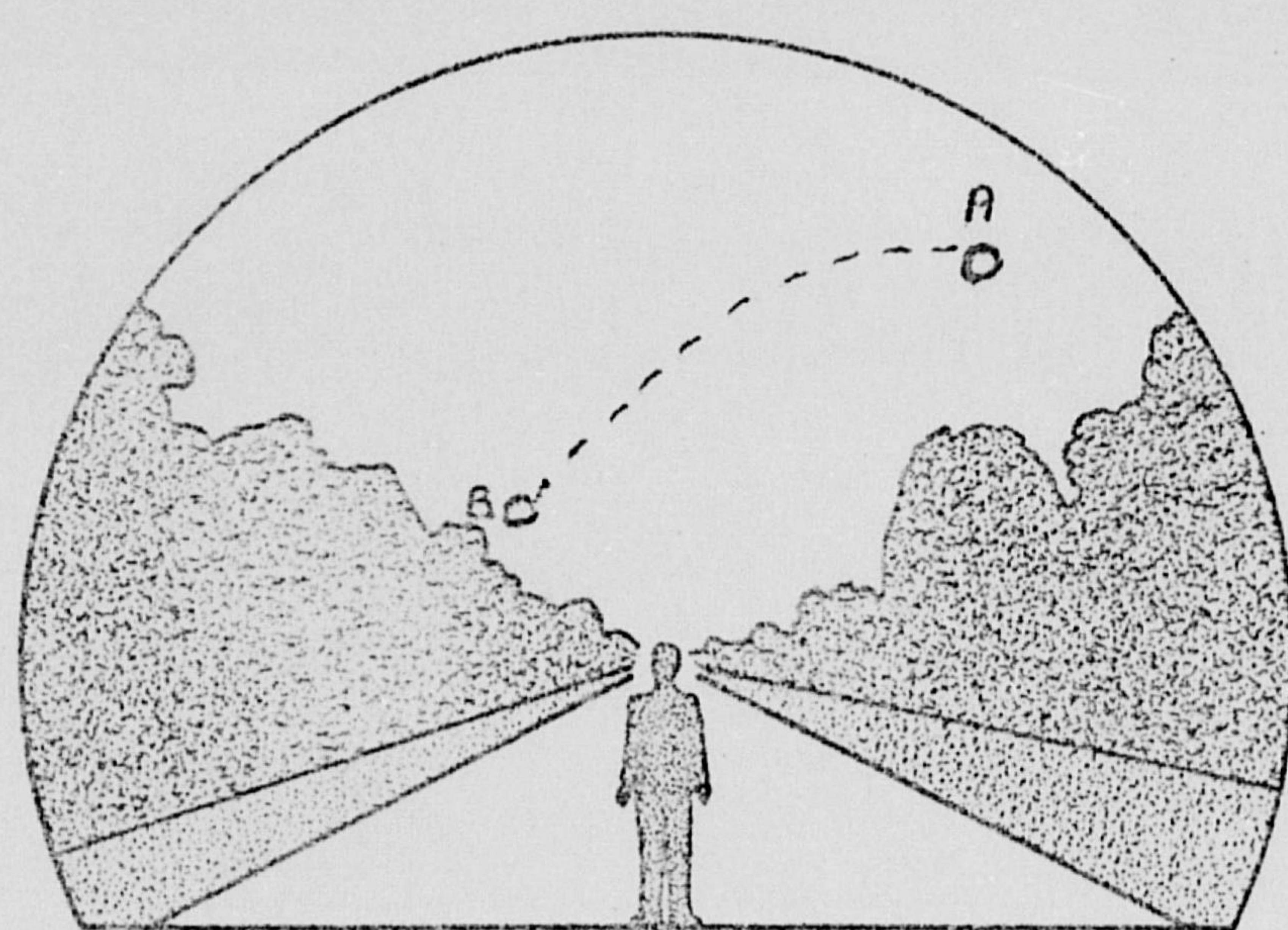
FORM
FTD SEP 63 0-329 (TDE) Previous editions of this form may be used.

SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE		BUDGET BUREAU APPROVAL NUMBER 21-R258
<p>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.)</p>		
1. WHEN DID YOU SEE THE PHENOMENON?		
DAY <u>Mon.</u> MONTH <u>Feb.</u> YEAR <u>1969</u>		
2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON?		
HOUR <u>7:00</u> MINUTES <u>30</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.		
3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON?		
HOUR <u>7:00</u> MINUTES <u>50</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.		
4. TIME ZONE <input type="checkbox"/> DAYLIGHT SAVINGS <input checked="" type="checkbox"/> STANDARD		
<input type="checkbox"/> EASTERN <input checked="" type="checkbox"/> CENTRAL <input type="checkbox"/> MOUNTAIN <input type="checkbox"/> PACIFIC <input type="checkbox"/> 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.		

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.)			
<input checked="" type="checkbox"/> OUTDOORS		IN BUSINESS SECTION OF CITY	
<input 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	
		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		
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 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 checked="" type="checkbox"/> YES <input 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.			
<i>South east of it and Traveling toward it.</i>			
9. HOW LONG WAS THE PHENOMENON IN SIGHT?			
LENGTH OF TIME	20 minutes	CERTAIN OF TIME	NOT VERY SURE
<input checked="" type="checkbox"/> FAIRLY CERTAIN			
HOW WAS TIME DETERMINED?			
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.			

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 (<i>Low fluffy</i>)	FOG OR MIST	
TWILIGHT	CIRRUS CLOUDS (<i>High fleecy or Herring-bone</i>)	HEAVY RAIN	
X NIGHT	NIMBUS CLOUDS (<i>Rain</i>)	LIGHT RAIN OR DRIZZLE	
X CLEAR	CUMULONIMBUS CLOUDS (<i>Thunderstorms</i>)	HAIL	
PARTLY CLOUDY		SNOW OR SLEET	
COMPLETELY OVERCAST		UNKNOWN	
	X 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	X	NO MOONLIGHT
A FEW	MOON WITH HALO		UNKNOWN
X MANY	MOON HIDDEN BY CLOUDS		
UNKNOWN	PARTIAL (<i>New or quarter</i>)		
D. IF SIGHTING WAS IN DAYLIGHT, WAS THE SUN VISIBLE? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF "YES," WHERE WAS THE SUN AS YOU FACED THE PHENOMENON?			
IN FRONT OF YOU		TO YOUR RIGHT	OVERHEAD (<i>Near noon</i>)
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 lamp			
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 looked like a large star, white in color + was blinking off + on.			

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

14. WHAT DREW YOUR ATTENTION TO THE PHENOMENON?

The noise of an airplane

A. HOW DID IT FINALLY DISAPPEAR?

Behind the trees in the east

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 went behind a tree in the eastern sky + we couldn't see it again

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.

Half of it would be 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
SUNGASSES	BINOCULARS
WINDSHIELD	TELESCOPE
SIDE WINDOW OF VEHICLE	THEODOLITE
WINDOWPANE	<input checked="" type="checkbox"/> 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.

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.

A large star or planet that was blinking off and on.

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]

my family

24. GIVE THE FOLLOWING INFORMATION ABOUT YOURSELF

LAST NAME, FIRST NAME, MIDDLE NAME *[Redacted]*

ADDRESS *[Redacted]* CITY *[Redacted]* STATE *[Redacted]* ZIP *71601*
 TELEPHONE *[Redacted]* AGE *14* MALE FEMALE

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

*No job but know about space travel, astronomy,
 + U.F.O.'S.*

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

NAME *[Redacted]* DAY *Mon.* MONTH *Feb* YEAR *1969*

26. DATE YOU COMPLETED THIS QUESTIONNAIRE.

DAY *Mon.* MONTH *Feb* YEAR *1969*

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

None

10 Feb 69

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



REPLY TO
ATTN OF:
TDPT (UFO)

10 Feb

SUBJECT: UFO Observation, 10 Feb 1969

TO: [REDACTED]

Pine Bluff, Arkansas 71601

Reference your recent unidentified flying object sighting which you reported to the Air Force. The information which we have received is not sufficient for a scientific investigation. Request you complete the attached AF Form 117 and return it in the self-addressed envelope. Thank you for reporting your observation to the Air Force.

for Hector L. Quintanilla
HECTOR QUINTANILLA, Jr, Lt Colonel, USAF
Chief, Aerial Phenomena Office
Aerospace Technologies Division
Production Directorate

1 Atch
AF Form 117 w/envelope

Postmarked 13 Feb 69

Dear Sirs,

I would like to report a unidentified flying object
observed over Pine Bluff, Ark. on the day of 10, 1969
from 7:30 to 8:00 o'clock P.M.

It was like a large star with almost a dot. Had a little
reddish glow to it and it went from the now in
a semicircle to the North, it started to descend to
about 750 M. P. H. and was inconceivable about 5
minutes.

It was seen again with further mutations, at
in the eastern sky going south. It suddenly changed
direction to the North and we lost sight of it behind
the trees. I called my parents, some neighbors of
mine, a police officer and several other Pine Bluff people
all in. It's Write a letter back to me telling me what it is.

Very truly yours,

