

PROJECT 10073 RECORD

<b>1. DATE - TIME GROUP</b> 3 Aug 66 1050Z	<b>2. LOCATION</b> Dayton, Ohio (two witnesses)
<b>3. SOURCE</b> Civilian	<b>10. CONCLUSION</b> Balloon (possible) ✓ <i>JH</i>
<b>4. NUMBER OF OBJECTS</b> One	
<b>5. LENGTH OF OBSERVATION</b> 4 - 5 minutes	<b>11. BRIEF SUMMARY AND ANALYSIS</b> Observers noted white object with black marking or spots on lower half. At first object appeared to be an open parachute at quite a high distance, but with the naked eye no strings attached. Through binoculars it reminded me of two open parachutes fastened together, with black spots on lowe half.  Description is consistent with a balloon.
<b>6. TYPE OF OBSERVATION</b> Ground Visual Bx	
<b>7. COURSE</b> South	
<b>8. PHOTOS</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>9. PHYSICAL EVIDENCE</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Dayton 3 Aug

FTD (TDETR)/HL/8-Aug 66  
Wright-Patterson AFB, Ohio 45433  
8 August 1966


[REDACTED]  
Dayton, Ohio 45416

Dear Mr. [REDACTED]

Reference your unidentified observation of 3 August 1966. The information which we have received is not sufficient for evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided.

We wish to thank you for reporting your observation to the Air Force.

Sincerely,

  
HECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Project Blue Book

TDETR OFFICIAL FILE COPY

Office of Record

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 *White like a star*

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

*The whole object would have been covered by the head of a match stick, held at arms length.*

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.

STAR  
 O      O      STAR      STAR  
           ↑

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]*  
*[Redacted]*  
*Dayton Ohio*  
*45420*

32. Please give the following information about yourself:

NAME *[Redacted]* *[Redacted]* *[Redacted]*  
Last Name First Name Middle Name  
ADDRESS *[Redacted]* *Dayton* *45420* *Ohio*  
Street City Zone State  
TELEPHONE NUMBER *[Redacted]* AGE *25* SEX *Female*

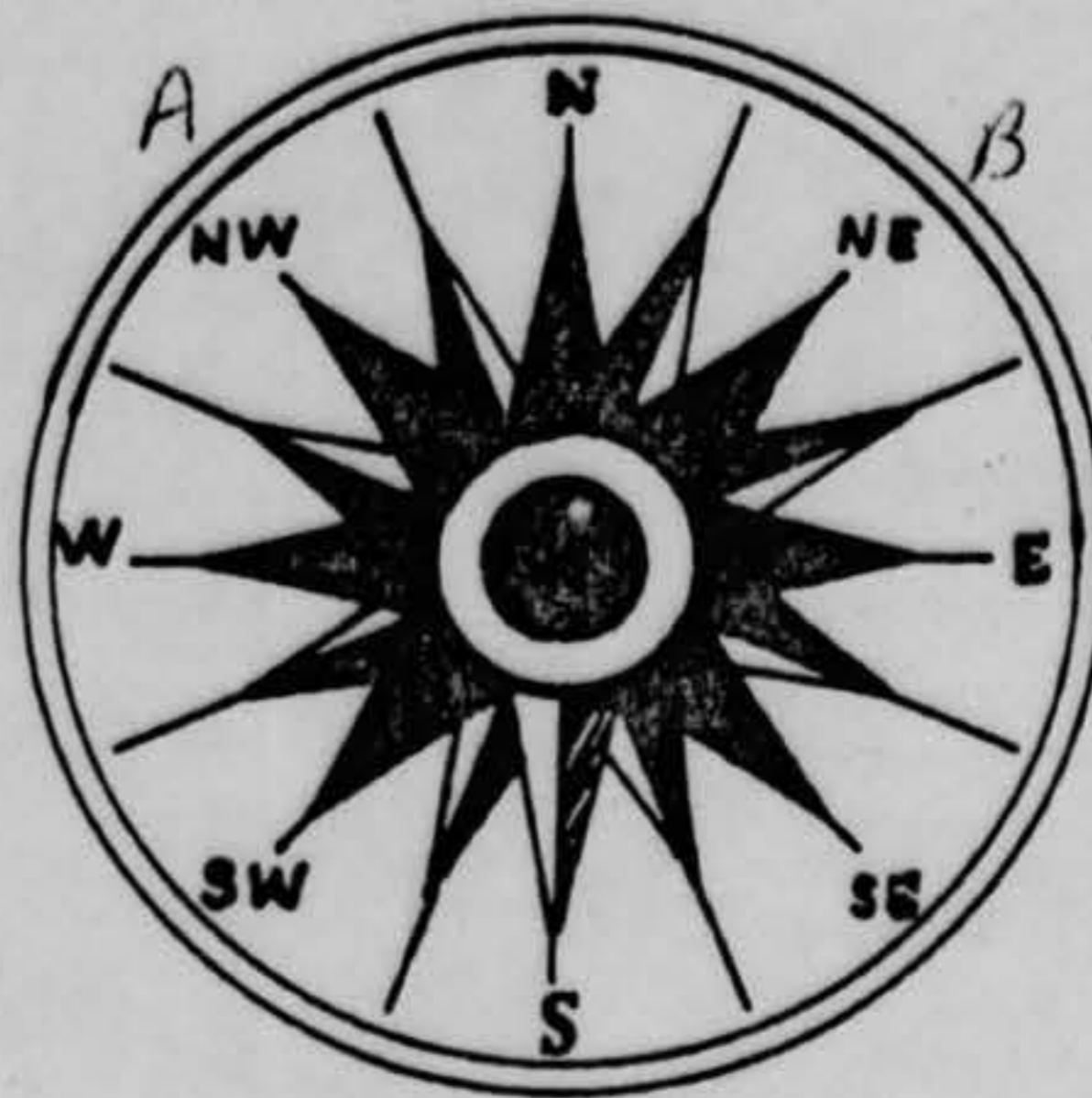
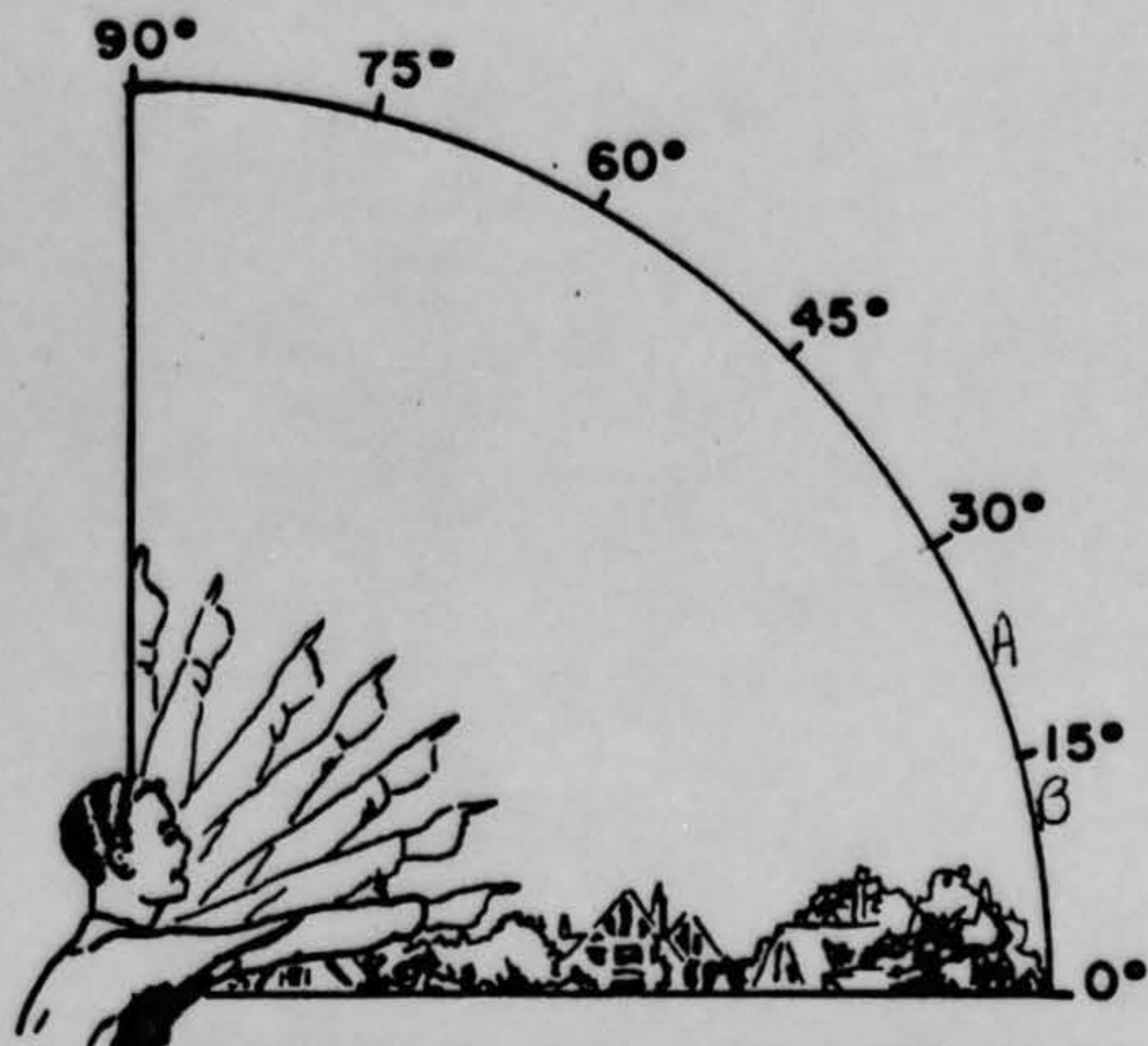
Indicate any additional information about yourself, including any special experience, which might be pertinent.

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

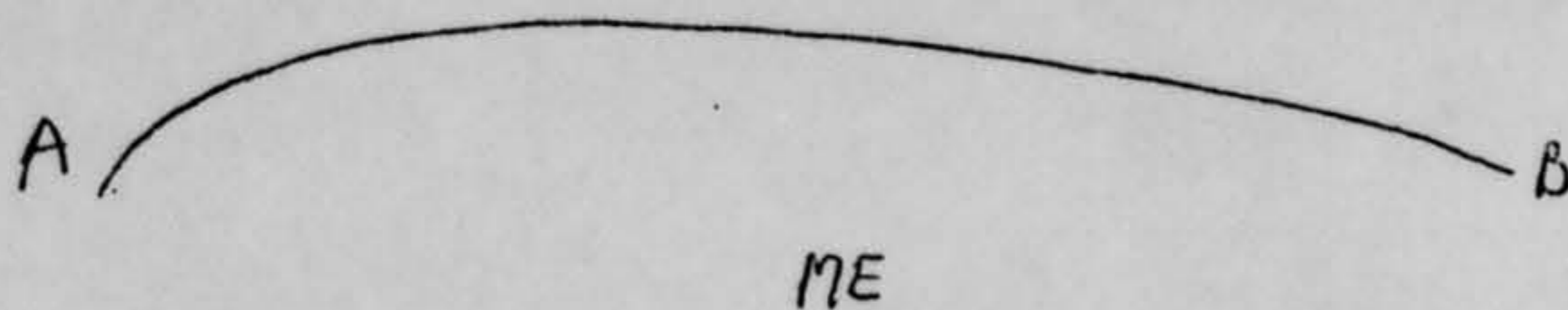
*21* *August* *1966*  
Day Month Year

*To a man who answered phone at U.F.O Headquarters*

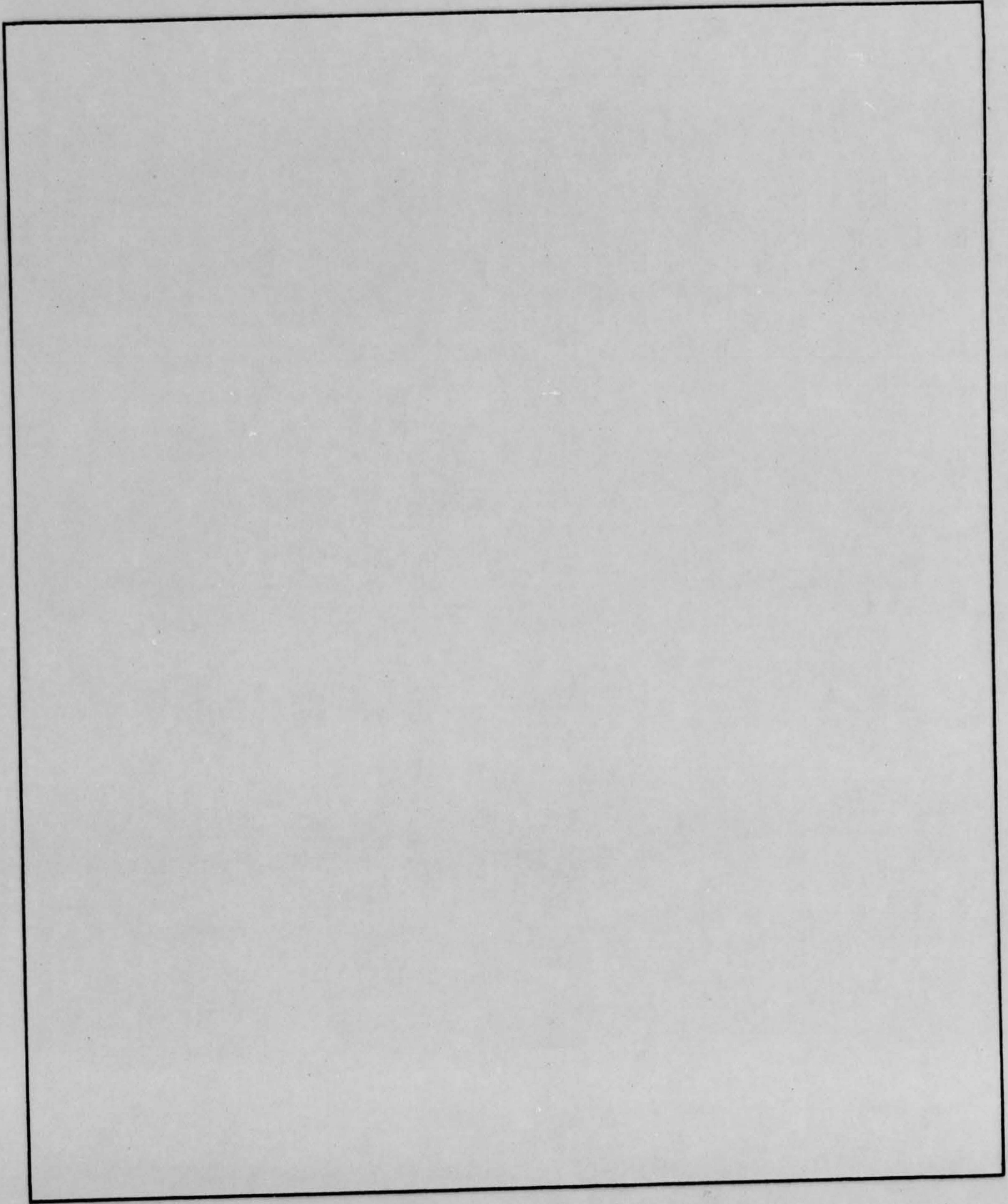
27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw 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.



34. Date you completed this questionnaire:

25      August      1966  
Day              Month              Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

[Empty response area for question 35]

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

\_\_\_\_\_

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

13. Did the object:

*moved slowly*

(Circle One for each question)

- |   |     |    |            |
|---|-----|----|------------|
| a. Appear to stand still at any time?           | Yes | No | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes | No | Don't know |
| c. Break up into parts or explode?              | Yes | No | Don't know |
| d. Give off smoke?                              | Yes | No | Don't know |
| e. Change brightness?                           | Yes | No | Don't know |
| f. Change shape?                                | Yes | No | Don't know |
| g. Flash or flicker?                            | Yes | No | Don't know |
| h. Disappear and reappear?                      | Yes | No | Don't know |





14. Did the object disappear while you were watching it? If so, how?

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):            Yes            No            Don't Know.            IF you answered YES, then tell what  
it moved behind: \_\_\_\_\_

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):            Yes            No            Don't Know.            IF you answered YES, then tell what  
in front of: \_\_\_\_\_

17. Tell in a few words the following things about the object:

- a. Sound           none            
b. Color           white - bright

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     | 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.



FTD (TDETR)  
Wright-Patterson AFB, Ohio 45433  
8 August 1966


[REDACTED]  
[REDACTED]  
Dayton, Ohio 45416

Dear Mr [REDACTED]

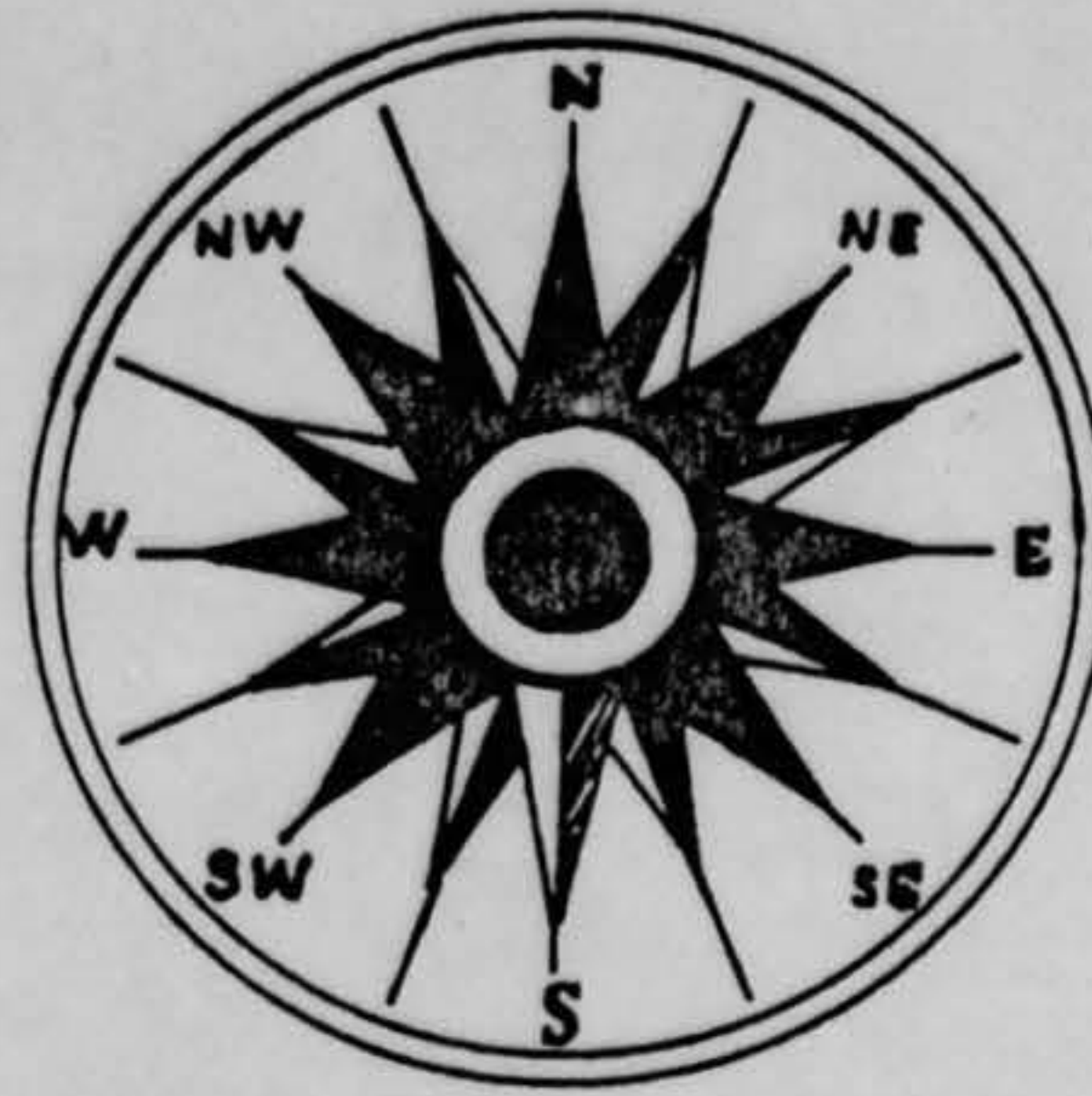
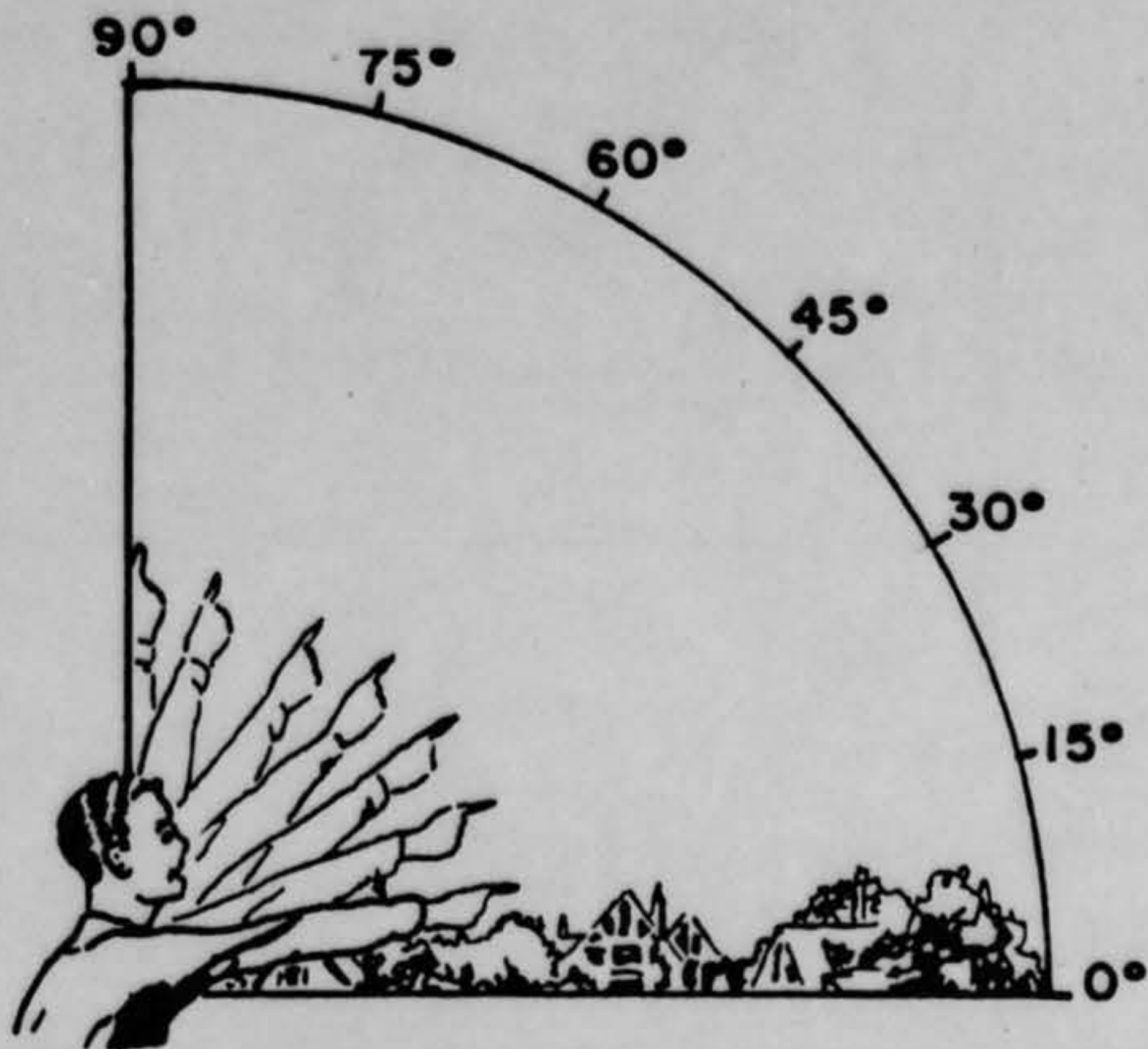
Reference your unidentified observation of 3 August 1966. The information which we have received is not sufficient for evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided.

We wish to thank you for reporting your observation to the Air Force.

Sincerely,

 HECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Project Blue Book

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.

Dayton, Ohio 21 Aug 66

FTD (TDETR)/hl  
Wright-Patterson AFB, Ohio 45433  
23 August 1966


Mrs. [REDACTED]  
Dayton, Ohio 45420

Dear Mrs. [REDACTED]

Reference your unidentified observation of 21 August 1966.  
The information which we have received is not sufficient  
for evaluation. Request you complete the attached FTD  
Form 164 and return it in the envelope provided.

We wish to thank you for reporting your observation to  
the Air Force.

Sincerely,

 HECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Project Blue Book

OFFICIAL FILE COPY

TDETR

Office of Record

PROJECT 10073 RECORD

<b>1. DATE - TIME GROUP</b> 21 August 66 22/0130Z	<b>2. LOCATION</b> Dayton, Ohio (2 Witnesses)
<b>3. SOURCE</b> Civilian	<b>10. CONCLUSION</b> Astro (ANTARES) ✓ <i>W</i>
<b>4. NUMBER OF OBJECTS</b> One	Antares was at 225 deg azimuth, 8 deg elevation at time of sighting.
<b>5. LENGTH OF OBSERVATION</b> 30 Minutes	<b>11. BRIEF SUMMARY AND ANALYSIS</b> Observer noted star like object which varied in color and moved periodically small distances. Object was stationary 85 per cent of the time even after moving to a new position. Object moved out of sight after glowing for approximately 30 minutes at high level. Cloud moved in front or behind the object.
<b>6. TYPE OF OBSERVATION</b> Ground-Visual (BX)	
<b>7. COURSE</b> SSW	
<b>8. PHOTOS</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>9. PHYSICAL EVIDENCE</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

SNC

Director  
 Aerospace Studies Inst  
 ATTN: Archives Branch  
 Maxwell AFB, Alabama

RETURN TO

K043.6012-1  
 21-31 Aug 66





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 ← some banks crossed later
- 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 Varied color.
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

---

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other Varied color but moved periodically small distance but was stationary 75% of time even after moving to new sightly.

13. Did the object:

(Circle One for each question)

- a. Appear to stand still at any time?
- b. Suddenly speed up and rush away at any time?
- c. Break up into parts or explode?
- d. Give off smoke?
- e. Change brightness?
- f. Change shape?
- g. Flash or flicker?
- h. Disappear and reappear?

- |     |    |            |
|-----|----|------------|
| Yes | No | Don't know |
| Yes | No | Don't know |
| Yes | No | Don't know |
| Yes | No | Don't know |
| Yes | No | Don't know |
| Yes | No | Don't know |
| Yes | No | Don't know |

it did disappear.

14. Did the object disappear while you were watching it? If so, how? *moved out of sight*  
~~after glancing for approximately 30 minutes~~  
*after glancing for approximately 30 minutes*  
*at high level like a satellite.*

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: ~~the~~ *the cloud moved in front of view then*  
*and then reappeared.*

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: *Same as above.*

17. Tell in a few words the following things about the object:

- a. Sound *Distance to far estimated 20 miles at 250,000 feet at 60 degree angle.*  
 b. Color *white Red & Green flashes but constant white glow*

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

*all of the object*

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? 20 to 50 miles

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 on my patio.

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 South Dayton.

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

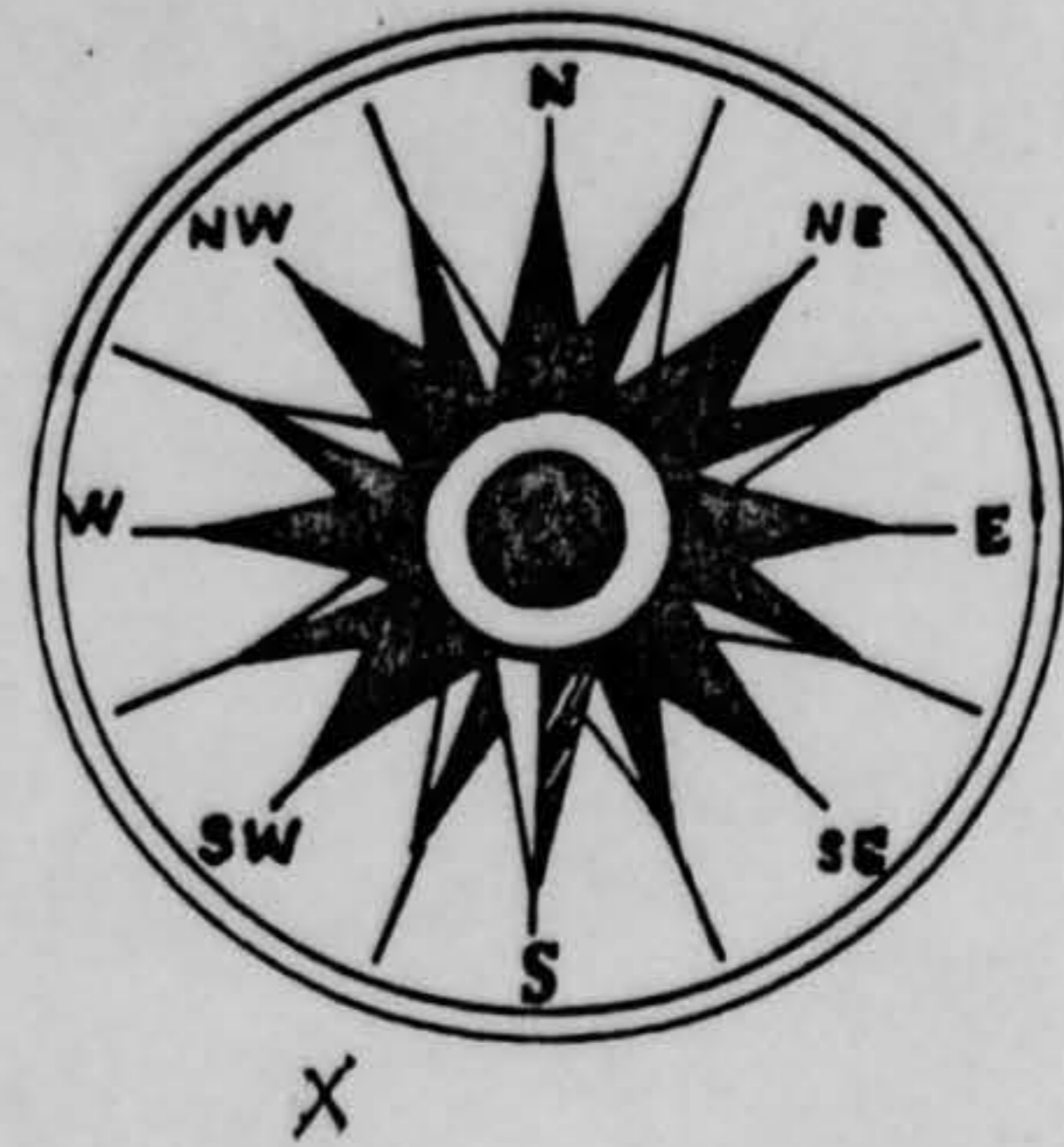
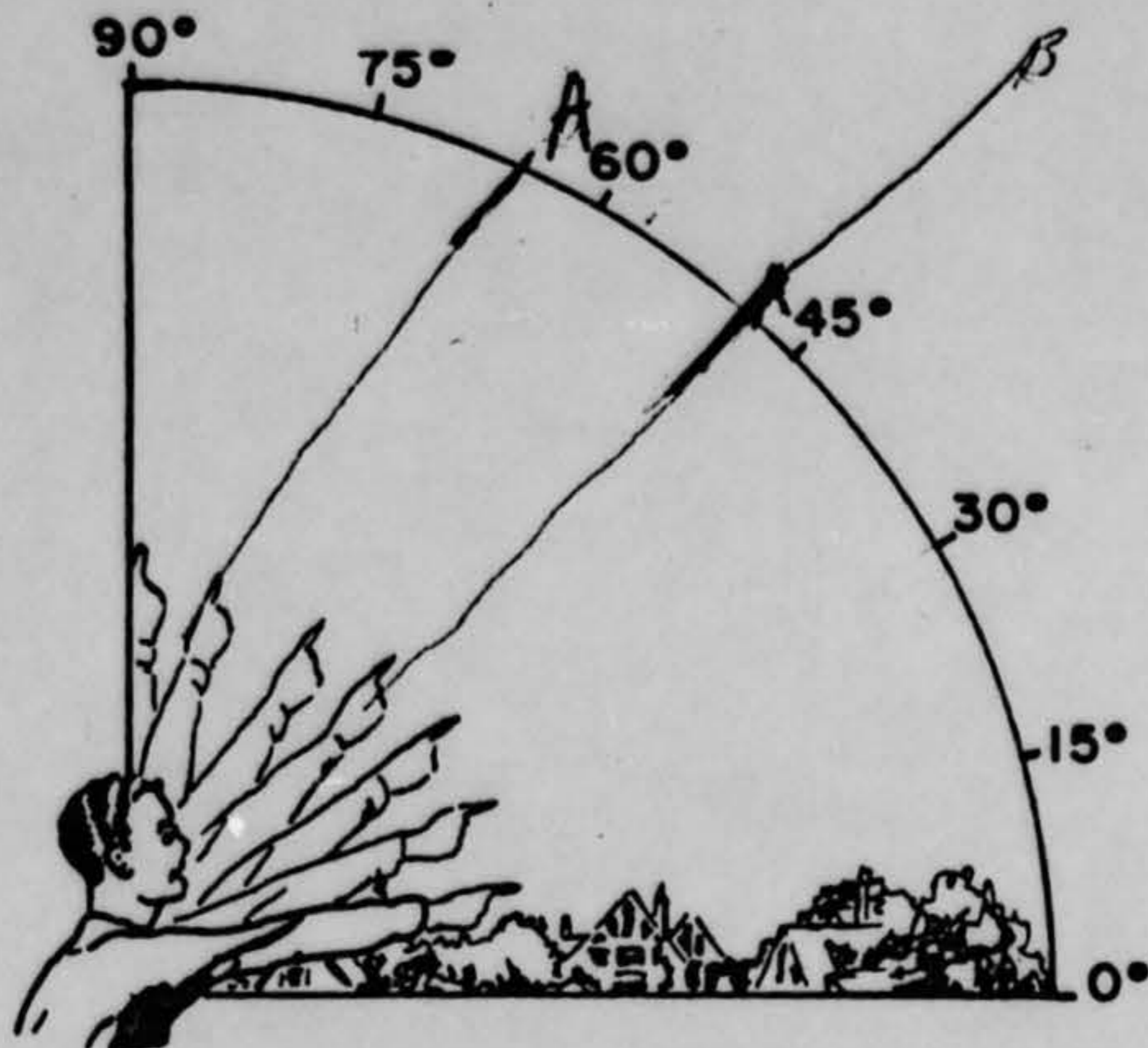
25. Did you observe the object through any of the following?

- |                 |                                      |    |               |                                      |       |
|-----------------|--------------------------------------|----|---------------|--------------------------------------|-------|
| a. Eyeglasses   | <input checked="" type="radio"/> Yes | No | e. Binoculars | <input checked="" type="radio"/> 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      | _____                                | _____ |

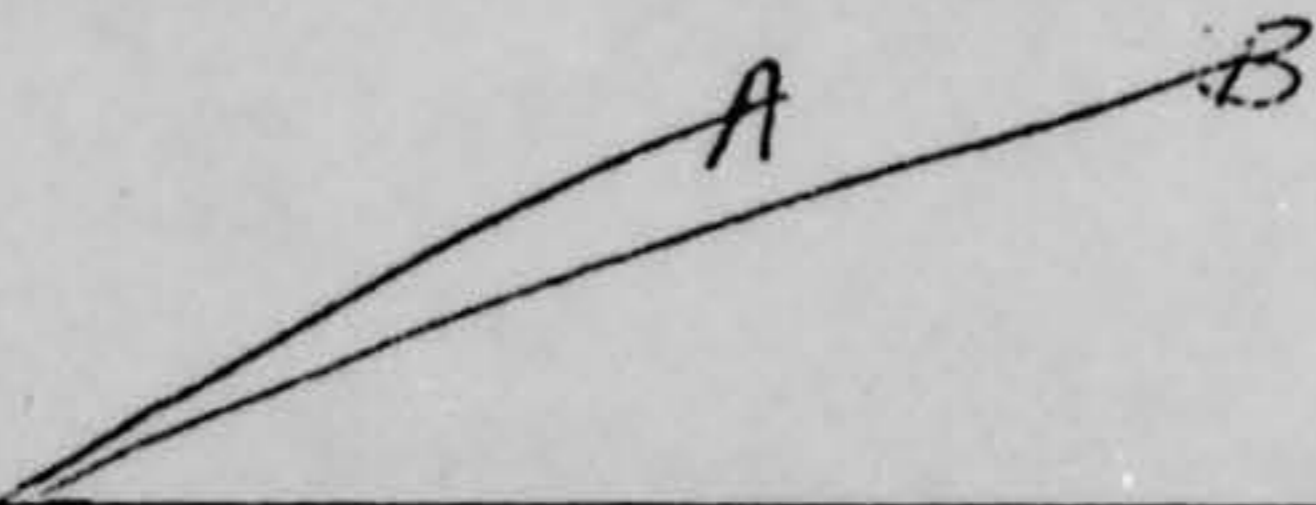
7x35 Power

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? 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.

no




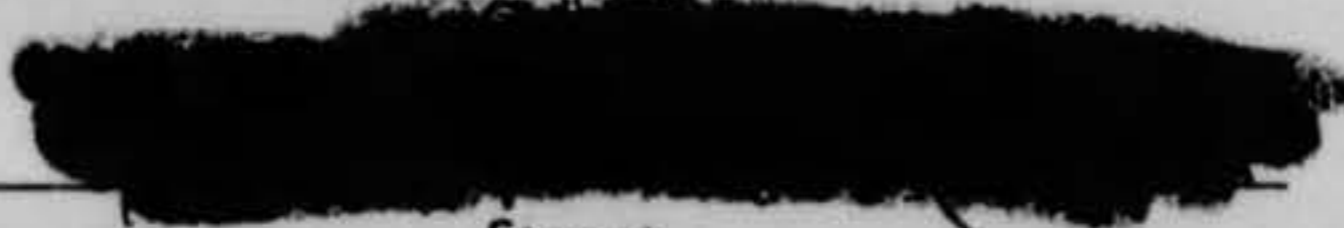

31. Was anyone else with you at the time you saw the object? (Circle One)  Yes  No

31.1 IF you answered YES, did they see the object too? (Circle One)  Yes  No

31.2 Please list their names and addresses:

Margaret ~~McGowan~~ (wife)

32. Please give the following information about yourself:

NAME     
Last Name First Name Middle Name  
ADDRESS  Dayton 39 Ohio  
Street City Zone State  
TELEPHONE NUMBER  46 SEX Male

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?

21 August 1964  
Day Month Year

34. Date you completed this questionnaire:

Day

Month

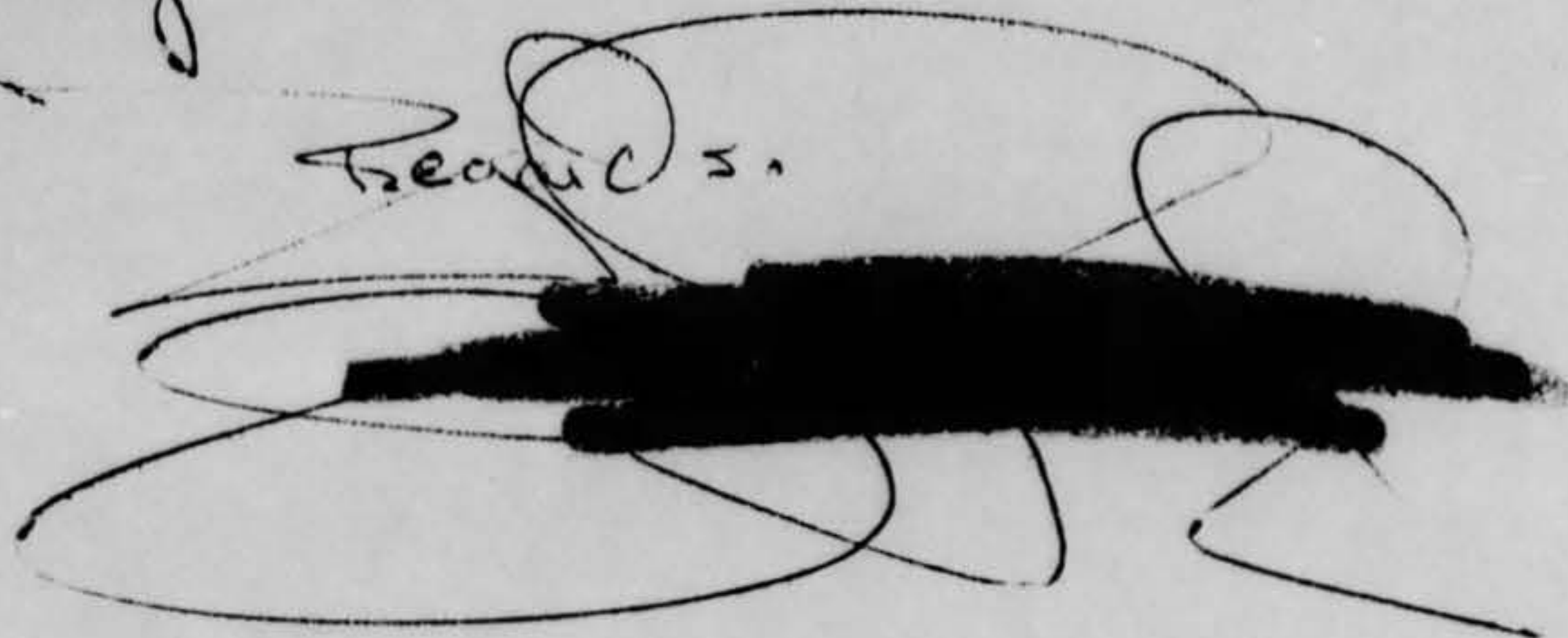
Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

This concludes my observation.

Thanks so much for considering  
my observation in the sense of  
reality.

Beard S.



FTD (TDETR) /HL  
Wright-Patterson AFB, Ohio  
8 August 1966

[REDACTED]  
Dayton, Ohio 45416

Dear Mr. [REDACTED]

Reference your unidentified observation of 3 August 1966. The information which we have received is not sufficient for evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided.

We wish to thank you for reporting your observation to the Air Force.

Sincerely,

HECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Project Blue Book

TDETR OFFICIAL FILE COPY

Office of Record



MR. [REDACTED]

OBJECT OVER MIDDLETOWN

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.

<p>1. When did you see the object?</p> <p><u>21 Aug</u>      <u>66</u></p> <p>Day      Month      Year</p>	<p>2. Time of day: <u>2115</u>      _____</p> <p>Hour      Minutes</p> <p>(Circle One):      A.M.      or      <u>P.M.</u></p>
--	--

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?

DAYTON      \_\_\_\_\_      \_\_\_\_\_

Nearest Postal Address      City or Town      State or County

5. How long was object in sight? (Total Duration)      \_\_\_\_\_      15      \_\_\_\_\_

Hours      Minutes      Seconds

a. Certain      c. Not very sure  
 b. Fairly certain      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?

a. Bright       a. Bright  
 b. Cloudy       b. Cloudy

DAY      NIGHT

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      d. To your left  
 b. In back of you       e. Overhead  
 c. To your right       f. Don't remember

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

\_\_\_\_\_

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

13. Did the object:

(Circle One for each question)

- |   |                                      |    |            |
|---|--------------------------------------|----|------------|
| a. Appear to stand still at any time?           | <input checked="" type="radio"/> 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 |

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     | 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 | <input checked="" type="radio"/> e. Binoculars | <input checked="" type="radio"/> 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.

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     | 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 | <input checked="" type="radio"/> e. Binoculars | <input checked="" type="radio"/> 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.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

31. Was anyone else with you at the time you saw the object? (Circle One)      Yes      No

31.1 IF you answered YES, did they see the object too? (Circle One)      Yes      No

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

NAME [REDACTED]      [REDACTED]      [REDACTED]  
Last Name      First Name      Middle Name

ADDRESS [REDACTED]      Dayton      Ohio  
Street      City      Zone      State

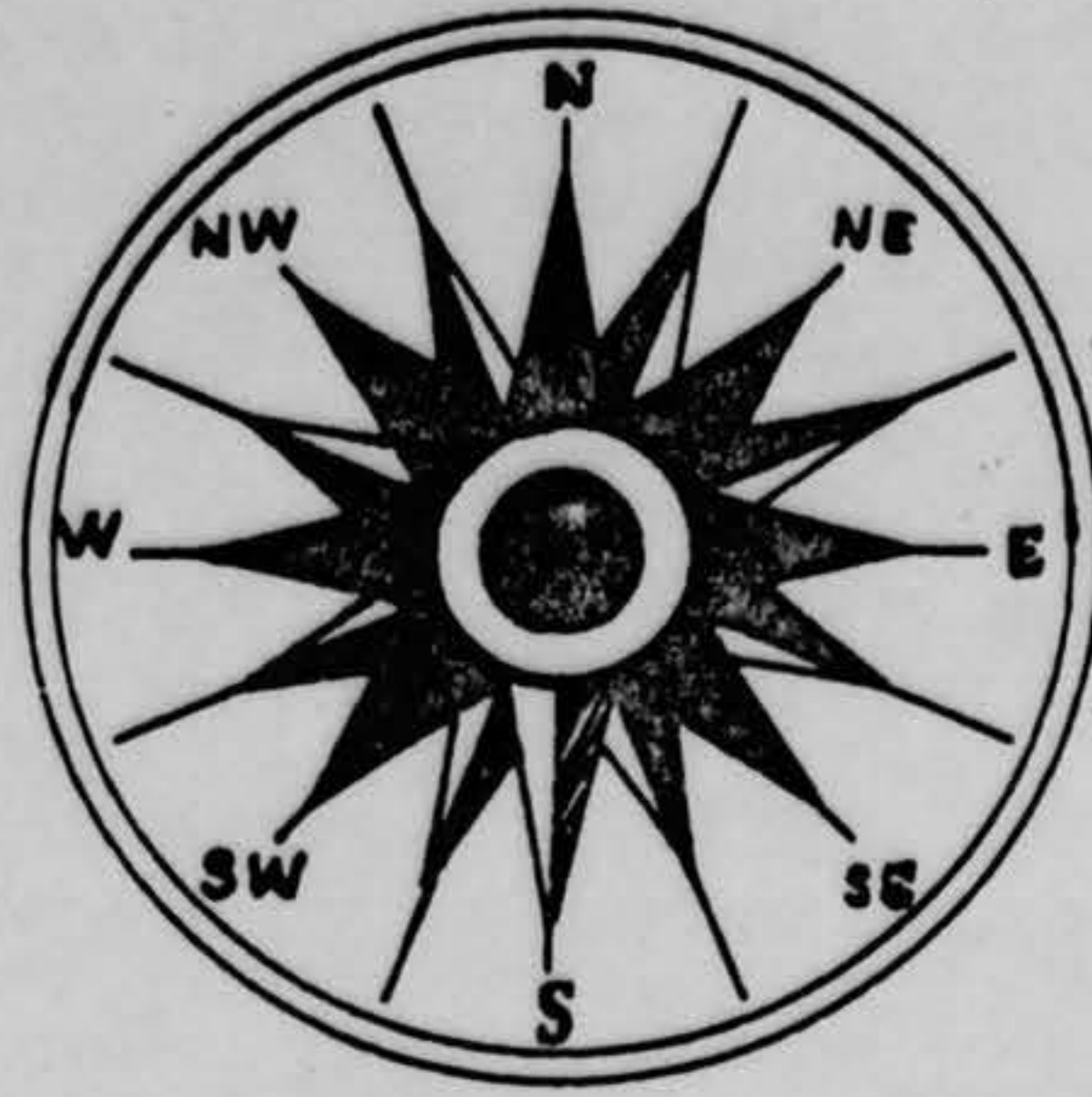
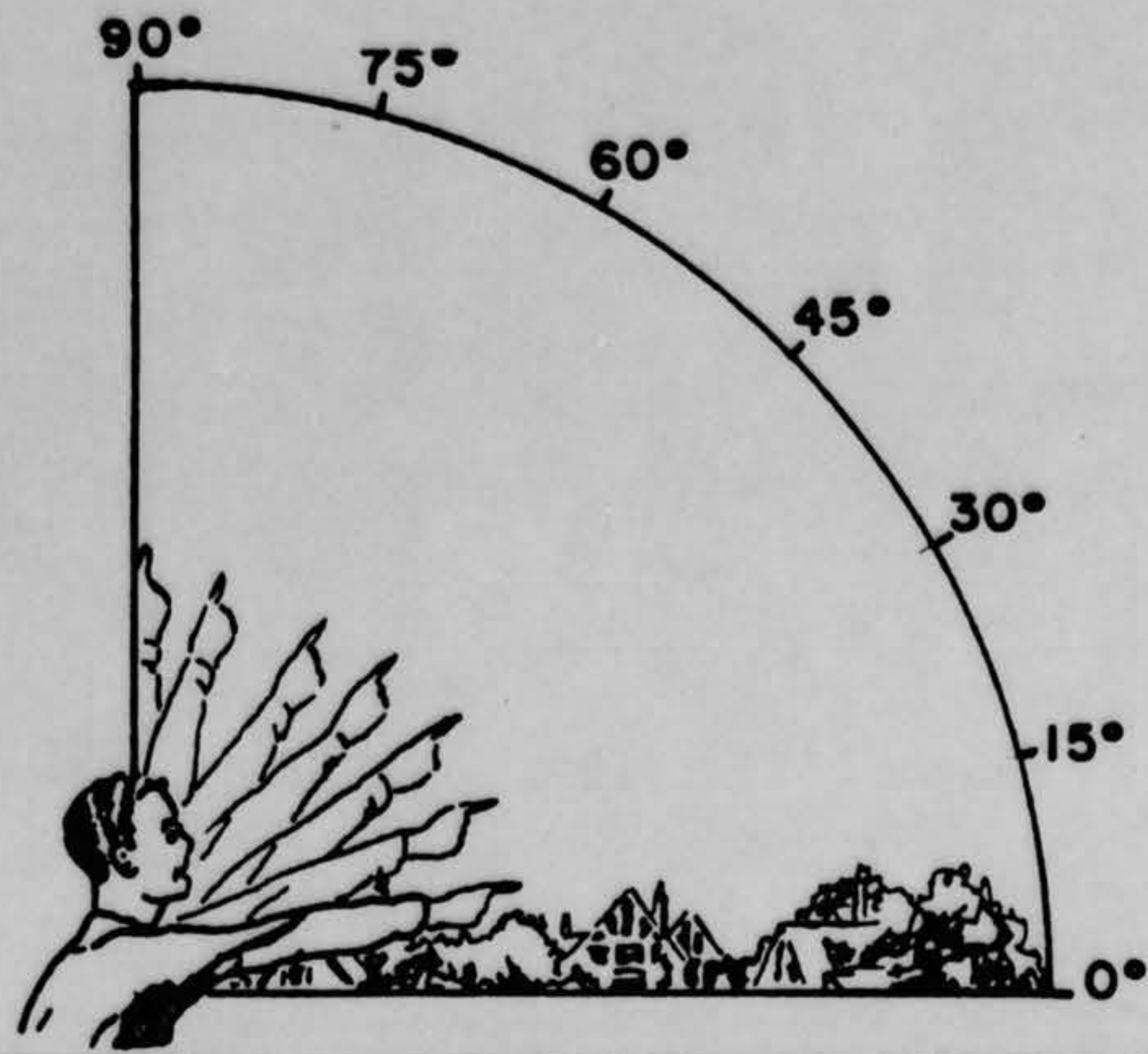
TELEPHONE NUMBER [REDACTED]      AGE \_\_\_\_\_      SEX MALE      45439

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?

21 Aug 66      \_\_\_\_\_      \_\_\_\_\_  
Day      Month      Year

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.

34. Date you completed this questionnaire:

\_\_\_\_\_

Day                      Month                      Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

*Out of Area*

6 Sept. 66

Conversation with Mr [REDACTED] revealed that he was watching the object in the SSW. There were white, red, and green flashes, but a constant white glow. The object moved out of sight after being visible for about 30 minutes.



Dayton, O.

21 August 66

FTD (TDETR)/hl  
Wright-Patterson AFB, Ohio 45433  
23 August 1966

Mr. [REDACTED]  
Dayton, Ohio 45439

Dear Mr. [REDACTED]

Reference your unidentified observation of 21 August 1966. The information which we have received is not sufficient for evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided.

We wish to thank you for reporting your observation to the Air Force.

Sincerely,

(H)  
HECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Project Blue Book

OFFICIAL FILE COPY

TDETR  
Office of Record

1. DATE - TIME GROUP 23 August 66 23/2020Z	2. LOCATION Dayton, Ohio (5 Witnesses)
3. SOURCE Civilian	10. CONCLUSION Probable (WEATHER BALLOON) <i>JA</i>
4. NUMBER OF OBJECTS One	
5. LENGTH OF OBSERVATION Varied	11. BRIEF SUMMARY AND ANALYSIS  Observers watched a Aluminium colored object move behind a house and return. The object was compared to a plate turned upside down. Observers reported hearing a high pitched sound as the object traveled toward the north. The edges of the object were like a bright star. Object was not in sight continuously. Object reported by several young boys. The description is consistent with that of an aircraft observation. In the late afternoon the sun was setting about 1850 and the witnesses could have seen the suns reflection off of an aircraft approaching either Vandalia or Wright-Patterson AFB. On the initial sighting form the witnesses said that the object was seen for about 5 minutes, but, on the more recent Form the duration of the sighting was 27 seconds.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE Northward	
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.

(UFO)

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?

3 Day Aug Month 1966 Year

2. Time of day: 19 Hour 30 Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern b. Central c. Mountain d. Pacific e. Other Eastern

(Circle One): a. Daylight Saving b. Standard

4. Where were you when you saw the object?

[Redacted] Nearest Postal Address Middledale City or Town Ohio State or County

5. How long was object in sight? (Total Duration)

Hours 10 Minutes Seconds

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

5.1 How was time in sight determined?

estimate

5.2 Was object in sight continuously?

Yes [checked] No

6. What was the condition of the sky?

DAY a. Bright b. Cloudy

NIGHT a. Bright b. Cloudy

no haze Bright evening

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

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?

23 Day      May Month      1966 Year

2. Time of day: 5 Hour      20 Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern  
b. Central  
c. Mountain  
d. Pacific  
e. Other

(Circle One): a. Daylight Saving  
b. Standard

4. Where were you when you saw the object?

[Redacted] Nearest Postal Address

Dayton City or Town

Ohio State or County

5. How long was object in sight? (Total Duration)

Hours      Minutes      27 Seconds

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

5.1 How was time in sight determined? watch

5.2 Was object in sight continuously? Yes      No [checked]

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      d. To your left  
b. In back of you      e. Overhead  
c. To your right      f. Don't remember

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:

a match

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?           | <u>Yes</u> | No        | Don't know |
| b. Suddenly speed up and rush away at any time? | <u>Yes</u> | No        | Don't know |
| c. Break into parts or explode?                 | Yes        | <u>No</u> | Don't know |
| d. Give off smoke?                              | Yes        | <u>No</u> | Don't know |
| e. Change brightness?                           | <u>Yes</u> | No        | Don't know |
| f. Change shape?                                | Yes        | <u>No</u> | Don't know |
| g. Flash or flicker?                            | Yes        | <u>No</u> | Don't know |
| h. Disappear and reappear?                      | <u>Yes</u> | No        | Don't know |

14. Did the object disappear while you were watching it? If so, how?

*over our house*

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: *it moved behind the house and came back*

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 *a ping high pitched sound*  
 b. Color *aluminum*

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?

*1/3 of it*

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.



20. Do you think you can estimate the speed of the object?

(Circle One) Yes  No

IF you answered YES, then what speed would you estimate? \_\_\_\_\_

21. Do you think you can estimate how far away from you the object was?

(Circle One) Yes  No

IF you answered YES, then how far away would you say it was? \_\_\_\_\_

22. Where were you located when you saw the object?

(Circle One):

- a. Inside a building
- b. In a car
- c. Outdoors
- d. In an airplane (type) \_\_\_\_\_
- e. At sea
- f. Other \_\_\_\_\_

23. Were you (Circle One)

- a. In the business section of a city?
- b. In the residential section of a city?
- c. In open countryside?
- d. Near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other \_\_\_\_\_

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

- |              |              |              |              |
|--------------|--------------|--------------|--------------|
| a. North     | 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

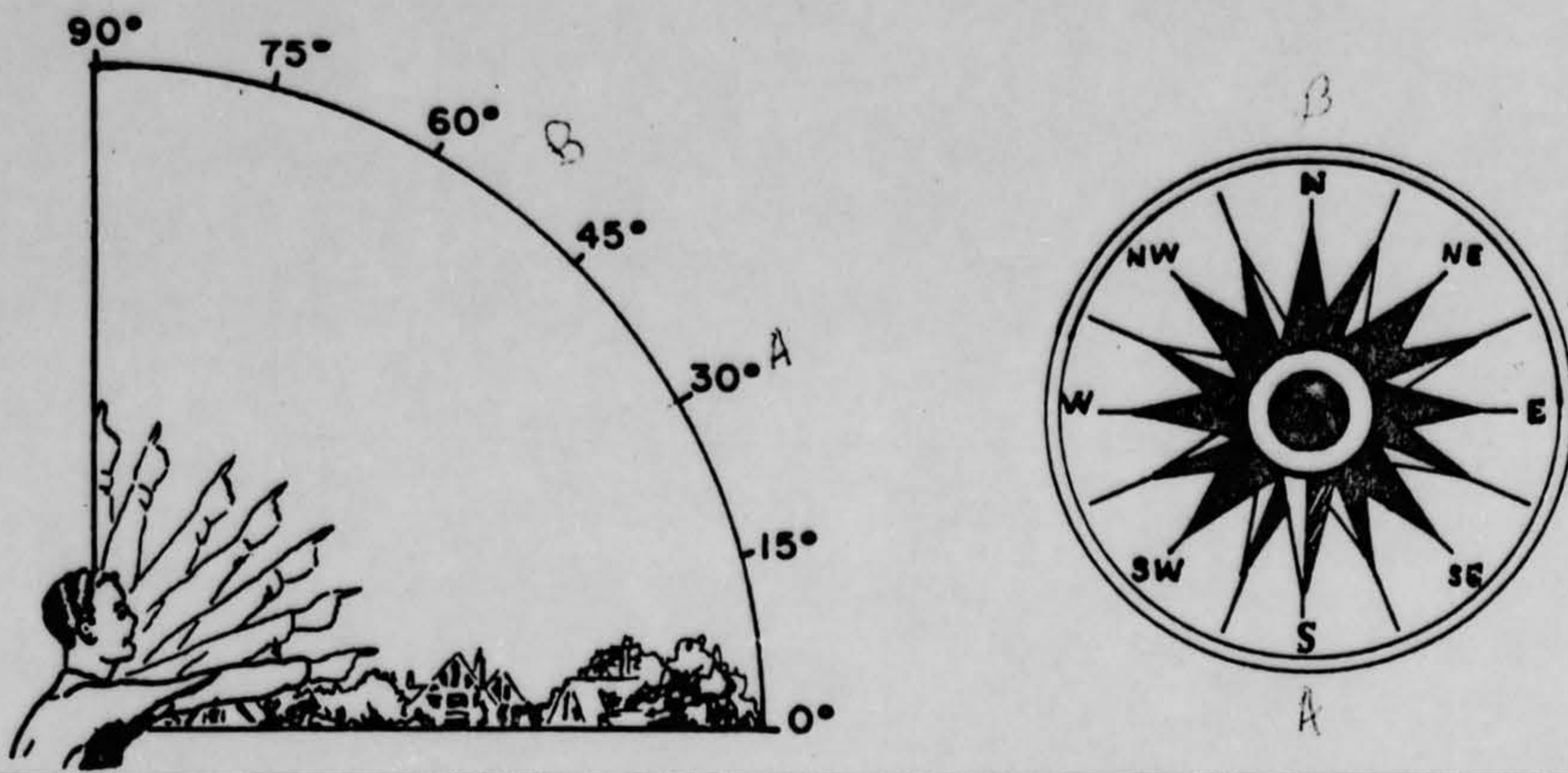
25. Did you observe the object through any of the following?

- |                 |                                      |                                     |               |                 |                                     |
|-----------------|--------------------------------------|-------------------------------------|---------------|-----------------|-------------------------------------|
| a. Eyeglasses   | <input checked="" type="radio"/> Yes | No                                  | e. Binoculars | Yes             | <input checked="" type="radio"/> No |
| b. Sun glasses  | Yes                                  | <input checked="" type="radio"/> No | f. Telescope  | Yes             | <input checked="" type="radio"/> No |
| c. Windshield   | Yes                                  | <input checked="" type="radio"/> No | g. Theodolite | Yes             | <input checked="" type="radio"/> No |
| d. Window glass | Yes                                  | <input checked="" type="radio"/> No | h. Other      | _____ <i>no</i> |                                     |

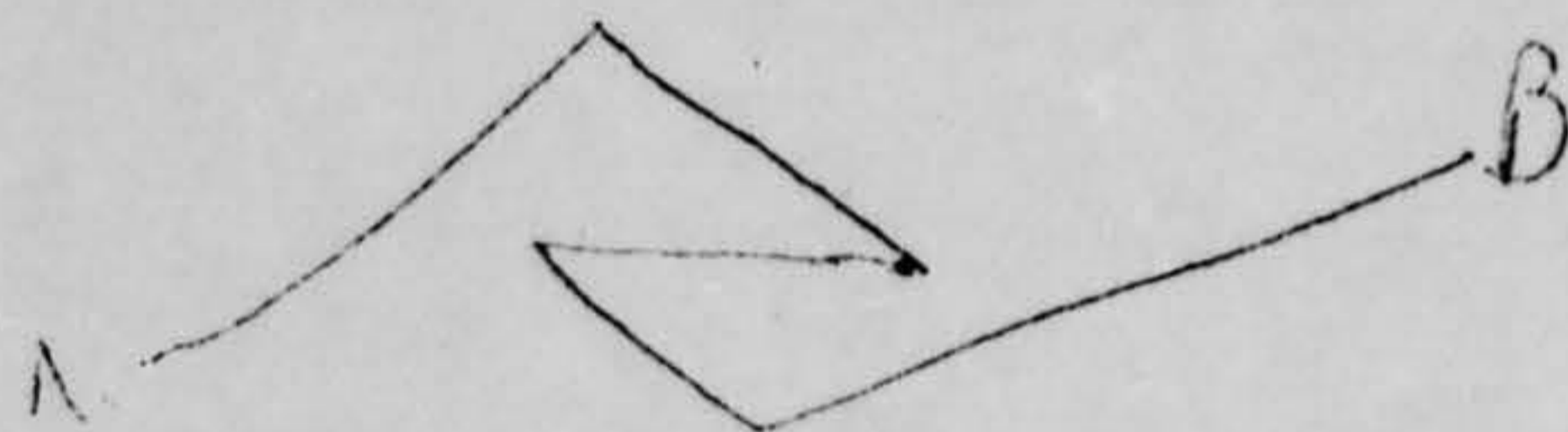
26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

*a plate turned upside down.*

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:

[Redacted names and addresses]

32. Please give the following information about yourself:

NAME [Redacted] [Redacted] [Redacted]  
 Last Name First Name Middle Name

ADDRESS [Redacted] Dayton 10 Ohio  
 Street City Zone State

TELEPHONE NUMBER [Redacted] AGE 13 SEX M

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

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

23 Aug. 1966  
Day Month Year

34. Date you completed this questionnaire:

4      Sept      1966  
Day      Month      Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

460

### 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.

<p>1. When did you see the object?</p> <p style="text-align: center;"> <u>23</u>      <u>Aug</u>      <u>1966</u>  <small>Day                  Month                  Year</small> </p>	<p>2. Time of day: <u>17 30</u> _____  <small>Hour                  Minutes</small></p> <p>(Circle One):      A.M.      or      <u>P.M.</u></p>
<p>3. Time Zone:</p> <p>(Circle One): a. <u>Eastern</u>  b. Central  c. Mountain  d. Pacific  e. Other _____</p> <p>(Circle One): a. Daylight Saving  b. Standard</p>	
<p>4. Where were you when you saw the object?</p> <p> <span style="background-color: black; color: black;">[REDACTED]</span>      <u>Dayton</u>      <u>Ohio</u>  <small>Nearest Postal Address      City or Town      State or County</small> </p>	
<p>5. How long was object in sight? (Total Duration) _____  <small>Hours                  Minutes                  Seconds</small></p> <p style="text-align: right; margin-right: 50px;"><u>5 min</u> →</p> <p>a. Certain                                  c. Not very sure  b. Fairly certain                          <u>d. Just a guess</u></p> <p>5.1 How was time in sight determined? _____</p> <p>5.2 Was object in sight continuously?      Yes _____      No <u>X</u></p>	
<p>6. What was the condition of the sky?</p> <p style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <small>DAY</small>  a. Bright  <u>b. Cloudy</u> </div> <div style="text-align: center;"> <small>NIGHT</small>  a. Bright  b. Cloudy </div> </p>	
<p>7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?</p> <p>(Circle One): a. In front of you                  <u>d. To your left</u>  b. In back of you                                  e. Overhead  c. To your right                                  f. Don't remember</p>	

164 other  
5000  
27 seconds

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:

*Brighter than the sun luminous*

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?

disappeared behind house and then returned

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: House

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: clouds

17. Tell in a few words the following things about the object:

a. Sound ping  
b. Color grey white pale aluminum

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?

$\frac{2}{3}$

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.

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

*Like reflections  
off metal  
very bright*

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:

*NA*

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?           | <input checked="" type="radio"/> Yes | No                                  | Don't know |
| b. Suddenly speed up and rush away at any time? | <input checked="" type="radio"/> Yes | No                                  | Don't know |
| c. Break up into parts or explode?              | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| d. Give off smoke?                              | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| e. Change brightness?                           | <input checked="" type="radio"/> Yes | No                                  | Don't know |
| f. Change shape?                                | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| g. Flash or flicker?                            | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| h. Disappear and reappear?                      | Yes                                  | <input checked="" type="radio"/> No | Don't know |

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 *in street*

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)

*N/A*

- |              |              |              |              |
|--------------|--------------|--------------|--------------|
| 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

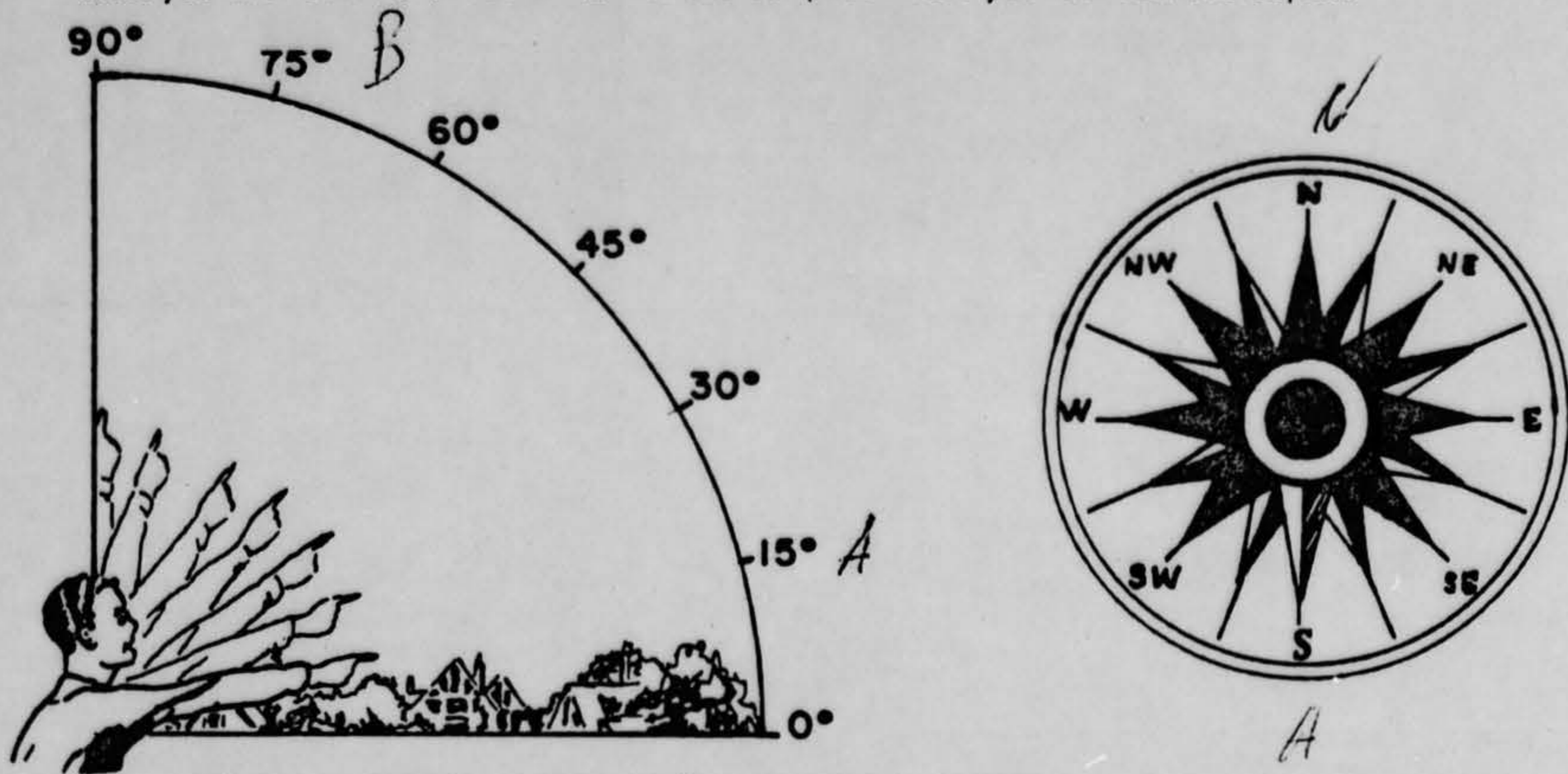
25. Did you observe the object through any of the following?

- |                 |                                      |                                     |               |       |                                     |
|-----------------|--------------------------------------|-------------------------------------|---------------|-------|-------------------------------------|
| a. Eyeglasses   | <input checked="" type="radio"/> Yes | <input checked="" type="radio"/> No | e. Binoculars | Yes   | <input checked="" type="radio"/> No |
| b. Sun glasses  | Yes                                  | <input checked="" type="radio"/> No | f. Telescope  | Yes   | <input checked="" type="radio"/> No |
| c. Windshield   | Yes                                  | <input checked="" type="radio"/> No | g. Theodolite | Yes   | <input checked="" type="radio"/> No |
| d. Window glass | Yes                                  | <input checked="" type="radio"/> 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.

*egg shape flattened*

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.

*Bounced around*

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:

[Redacted names and addresses] Dayton 45410

32. Please give the following information about yourself:

NAME [Redacted] [Redacted] [Redacted]
Last Name First Name Middle Name
ADDRESS [Redacted] DAYTON OHIO
Street City Zone State
TELEPHONE NUMBER [Redacted] AGE 13 SEX M 45410

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

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

Day Month Year

34. Date you completed this questionnaire:

23 Aug 66  
Day Month Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

*Capt. Steven OD*

Dayton, Ohio

23 Aug. 66

FTD (TDETR) / 44  
Wright-Patterson AFB, Ohio 45433  
31 August 1966


[REDACTED]  
Dayton, Ohio 45410

Dear [REDACTED],

Reference your unidentified observation of 23 August 1966. The information which we have received is not sufficient for evaluation. Request you, [REDACTED] and [REDACTED] complete the attached FTD Forms 164 and return them in the envelope provided.

We wish to thank you for reporting your observation to the Air Force.

Sincerely,

  
HECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Project Blue Book

OFFICIAL FILE COPY

TDETR

Office of Record

FTD (TDETR) *ll*  
Wright-Patterson AFB, Ohio 45433  
31 August 1966

[REDACTED]  
[REDACTED]  
Dayton, Ohio 45410

Dear [REDACTED]

Reference your unidentified observation of 23 August 1966.  
The information which we have received is not sufficient  
for evaluation. Request you complete the attached FTD  
Form 164 and return it in the envelope provided.

We wish to thank you for reporting your observation to  
the Air Force.

Sincerely,

*Q*  
HECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Project Blue Book

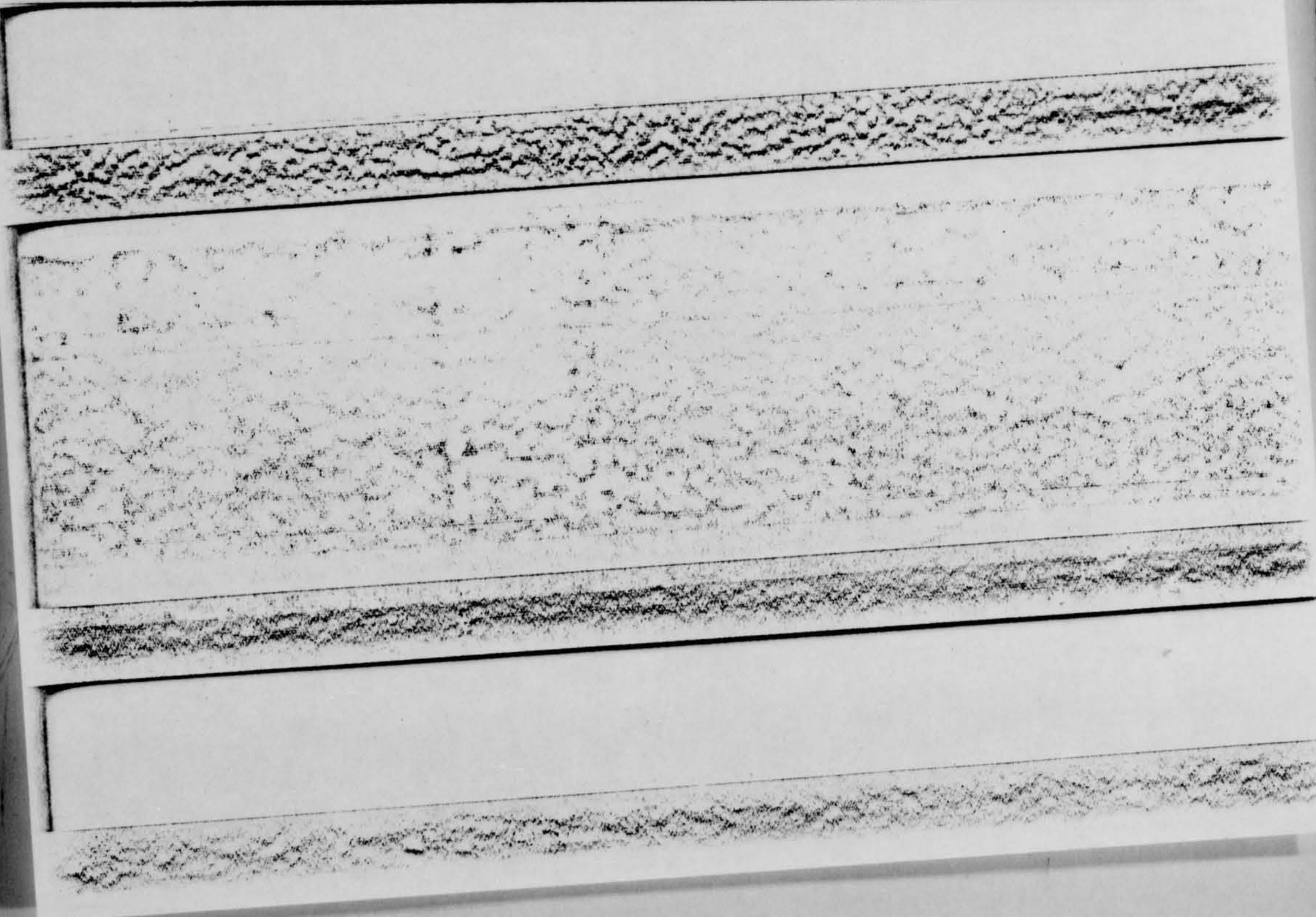
OFFICIAL FILE COPY

TDETR  
Office of Record

PROJECT 10073 RECORD

<b>1. DATE - TIME GROUP</b> 23-24 Aug 66 24/0405Z	<b>2. LOCATION</b> Dayton, Ohio
<b>3. SOURCE</b> Civilian	<b>10. CONCLUSION</b> (other) INSUFFICIENT DATA FOR EVALUATION
<b>4. NUMBER OF OBJECTS</b> One	
<b>5. LENGTH OF OBSERVATION</b> Varied	<b>11. BRIEF SUMMARY AND ANALYSIS</b> SEE CASE
<b>6. TYPE OF OBSERVATION</b> Ground Visual	
<b>7. COURSE</b> Varied	
<b>8. PHOTOS</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>9. PHYSICAL EVIDENCE</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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



Dayton, Ohio

23 & 24 Aug 66

Jeff Pate

FTD (TDETR)  
Wright-Patterson AFB, Ohio 45433  
25 August 1966

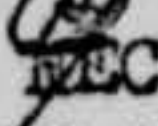
[REDACTED]  
Dayton, Ohio 45405

Dear [REDACTED]

Reference your unidentified observations of 23 and 24 August 1966. The information which we have received is not sufficient for evaluation. Request you complete the attached FTD Forms 164 and return in the envelope provided.

We wish to thank you for reporting your observation to the Air Force.

Sincerely,

  
HECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Project Blue Book

OFFICIAL FILE COPY

TDETR

Office of Record

3-64

**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.

<p>1. When did you see the object?</p> <p style="text-align: center;"> <u>23 &amp; 24</u>     <u>AUG</u>     <u>1966</u>  <small>Day                      Month                      Year</small> </p>	<p>2. Time of day: <u>2305</u> <u>Bo-4 DAVIS</u>  <small>Hour                      Minutes</small></p> <p>(Circle One):     A.M.     or     P.M.</p>
<p>3. Time Zone:</p> <p>(Circle One): <input checked="" type="radio"/> a. Eastern  <input type="radio"/> b. Central  <input type="radio"/> c. Mountain  <input type="radio"/> d. Pacific  <input type="radio"/> e. Other _____</p> <p>(Circle One):     a. Daylight Saving  <input checked="" type="radio"/> b. Standard</p>	
<p>4. Where were you when you saw the object?</p> <p><u>[REDACTED]</u>                      <u>DAYTON</u>                      _____  <small>Nearest Postal Address                      City or Town                      State or County</small></p>	
<p>5. How long was object in sight? (Total Duration)     _____  <small>Hours                      Minutes                      Seconds</small></p> <p style="text-align: center;"> <input type="radio"/> a. Certain                      <input type="radio"/> c. Not very sure  <input type="radio"/> b. Fairly certain                      <input type="radio"/> d. Just a guess </p> <p>5.1 How was time in sight determined? _____</p> <p>5.2 Was object in sight continuously?     Yes _____     No _____</p>	
<p>6. What was the condition of the sky?</p> <p style="text-align: center;"> <small>DAY</small>                      <small>NIGHT</small>  <input type="radio"/> a. Bright                      <input type="radio"/> a. Bright  <input type="radio"/> b. Cloudy                      <input checked="" type="radio"/> b. Cloudy </p>	
<p>7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?</p> <p>(Circle One):     a. In front of you                      d. To your left  <input type="radio"/> b. In back of you                      e. Overhead  <input type="radio"/> c. To your right                      <input type="radio"/> f. Don't remember</p>	

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:

BRIGHT RED FLASH SIMILAR TO FLASH BULB

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 FLASH OF LIGHT WAS SEEN FROM INSIDE OF HOUSE. IT WAS FIRST SEEN AT SOUTH SIDE OF HOUSE AND THEN FROM EAST SIDE OF HOUSE.

13. Did the object:

(Circle One for each question)

- |   |     |    |   |
|---|-----|----|---|
| a. Appear to stand still at any time?           | Yes | No | <input checked="" type="radio"/> Don't know |
| b. Suddenly speed up and rush away at any time? | Yes | No | <input checked="" type="radio"/> Don't know |
| c. Break up into parts or explode?              | Yes | No | <input checked="" type="radio"/> Don't know |
| d. Give off smoke?                              | Yes | No | <input checked="" type="radio"/> Don't know |
| e. Change brightness?                           | Yes | No | <input checked="" type="radio"/> Don't know |
| f. Change shape?                                | Yes | No | <input checked="" type="radio"/> Don't know |
| g. Flash or flicker?                            | Yes | No | <input checked="" type="radio"/> Don't know |
| h. Disappear and reappear?                      | Yes | No | <input checked="" type="radio"/> Don't know |



14. Did the object disappear while you were watching it? If so, how?

brightening, raised, departed at about 150°

15. Did the object move behind something at any time, particularly a cloud?

(Circle One): Yes  No  Don't Know. IF you answered YES, then tell what it moved behind: \_\_\_\_\_

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One): Yes  No  Don't Know. IF you answered YES, then tell what in front of: \_\_\_\_\_

17. Tell in a few words the following things about the object:

a. Sound No

b. Color No

Silver reflections

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

About  $\frac{1}{2}$  size of 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.

Round

14. Did the object disappear while you were watching it? If so, how?

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):      Yes      No      Don't Know.      IF you answered YES, then tell what it moved behind: \_\_\_\_\_

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):      Yes      No      Don't Know.      IF you answered YES, then tell what in front of: \_\_\_\_\_

17. Tell in a few words the following things about the object:

a. Sound \_\_\_\_\_

b. Color \_\_\_\_\_

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     | c. East      | e. South     | g. West      |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

24.2 How fast were you moving? \_\_\_\_\_ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

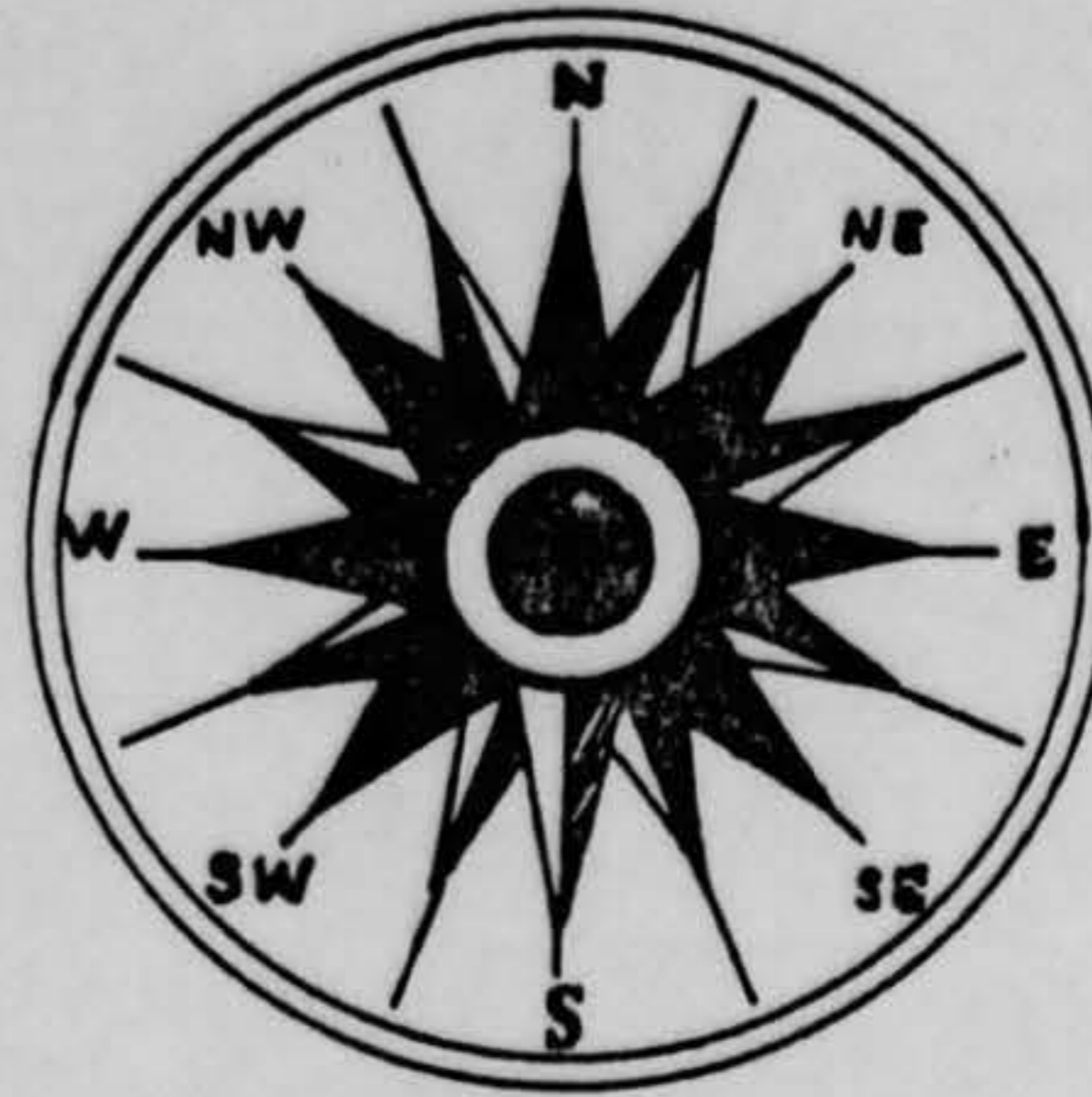
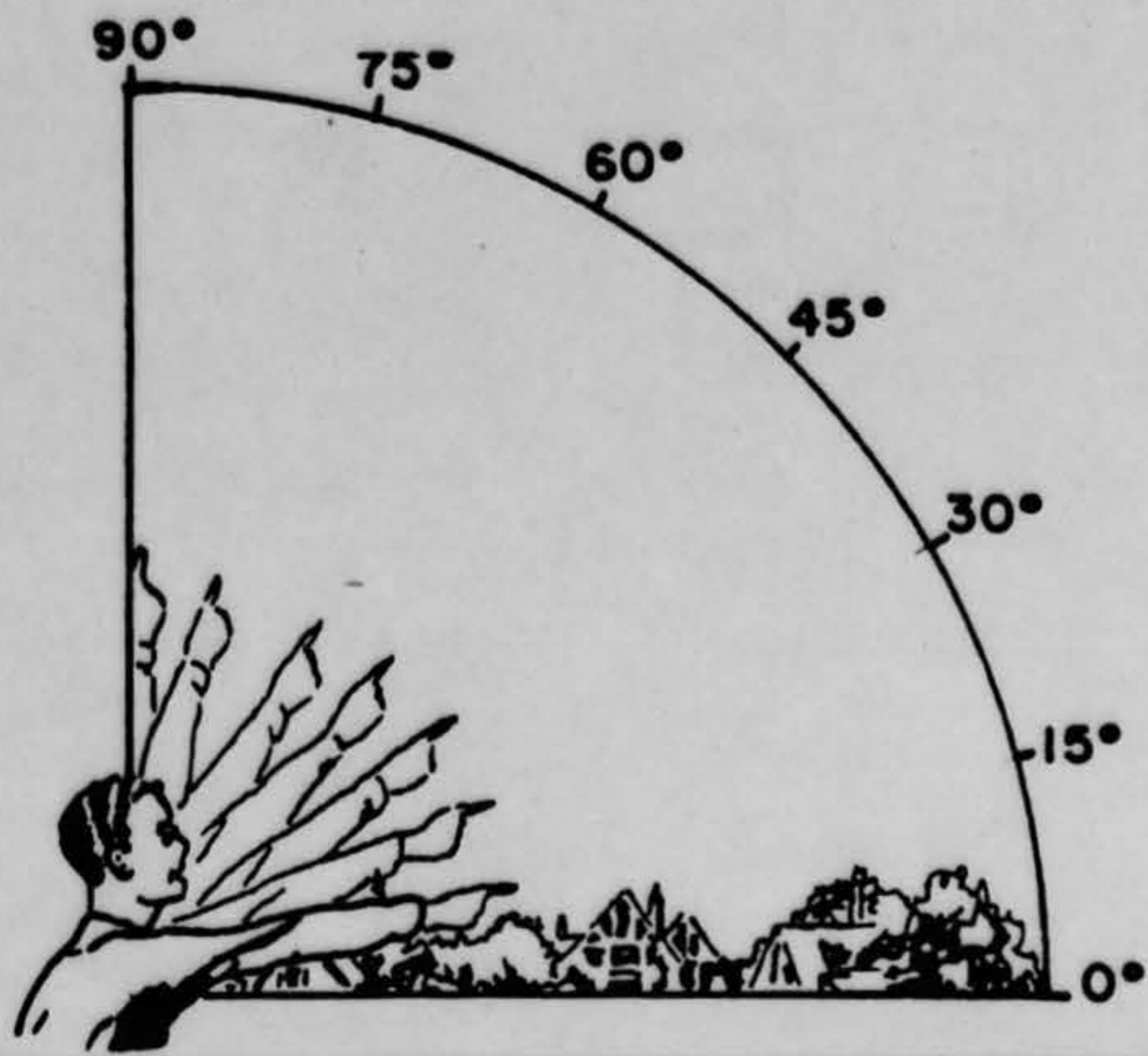
(Circle One)      Yes      No

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

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

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

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

29. IF there was MORE THAN ONE object, then how many were there? \_\_\_\_\_  
 Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.





8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

\_\_\_\_\_

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13. Did the object:

(Circle One for each question)

- |   |                                      |                                     |                                  |
|---|--------------------------------------|-------------------------------------|----------------------------------|
| a. Appear to stand still at any time?           | <input checked="" type="radio"/> Yes | <input type="radio"/> No            | <input type="radio"/> Don't know |
| b. Suddenly speed up and rush away at any time? | <input type="radio"/> Yes            | <input checked="" type="radio"/> No | <input type="radio"/> Don't know |
| c. Break up into parts or explode?              | <input type="radio"/> Yes            | <input checked="" type="radio"/> No | <input type="radio"/> Don't know |
| d. Give off smoke?                              | <input type="radio"/> Yes            | <input checked="" type="radio"/> No | <input type="radio"/> Don't know |
| e. Change brightness?                           | <input checked="" type="radio"/> Yes | <input type="radio"/> No            | <input type="radio"/> Don't know |
| f. Change shape?                                | <input type="radio"/> Yes            | <input checked="" type="radio"/> No | <input type="radio"/> Don't know |
| g. Flash or flicker?                            | <input type="radio"/> Yes            | <input checked="" type="radio"/> No | <input type="radio"/> Don't know |
| h. Disappear and reappear?                      | <input type="radio"/> Yes            | <input checked="" type="radio"/> No | <input type="radio"/> Don't know |

14. Did the object disappear while you were watching it? If so, how?

YES

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 \_\_\_\_\_

b. Color BRIGHT ORANGE LIGHT THAT DIMMED, BECAME BRIGHT, THE DISAPPEARED.

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? N/A

21. Do you think you can estimate how far away from you the object was?

(Circle One)      Yes      No

IF you answered YES, then how far away would you say it was? \_\_\_\_\_

22. Where were you located when you saw the object?  
(Circle One):

- a. Inside a building  
 b. In a car  
 c. Outdoors  
 d. In an airplane (type) \_\_\_\_\_  
 e. At sea  
 f. Other \_\_\_\_\_

23. Were you (Circle One)

- a. In the business section of a city?  
 b. In the residential section of a city?  
 c. In open countryside?  
 d. Near an airfield?  
 e. Flying over a city?  
 f. Flying over open country?  
 g. Other \_\_\_\_\_

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

- |              |              |              |              |
|--------------|--------------|--------------|--------------|
| a. North     | c. East      | e. South     | g. West      |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

24.2 How fast were you moving? \_\_\_\_\_ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)      Yes      No

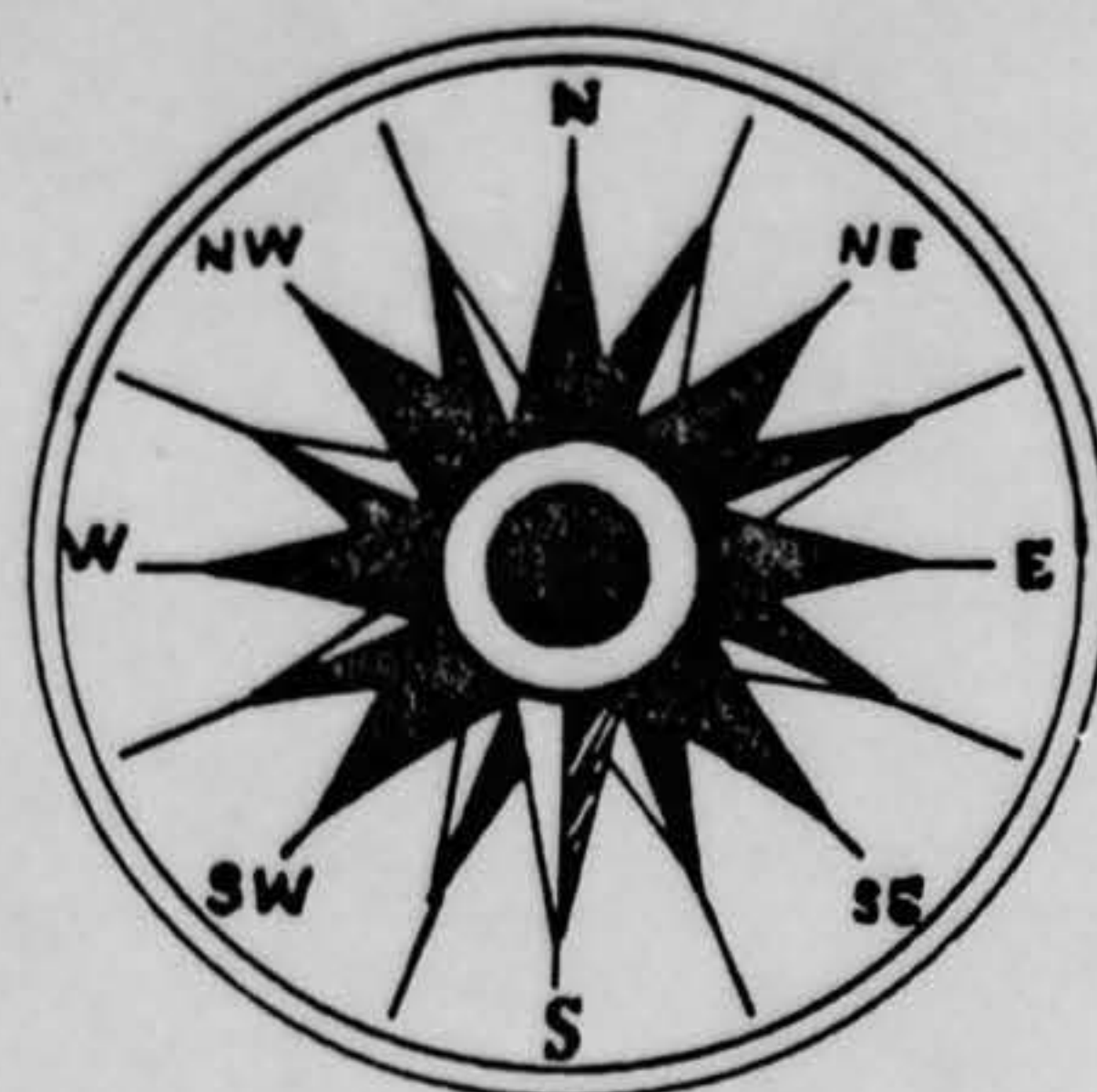
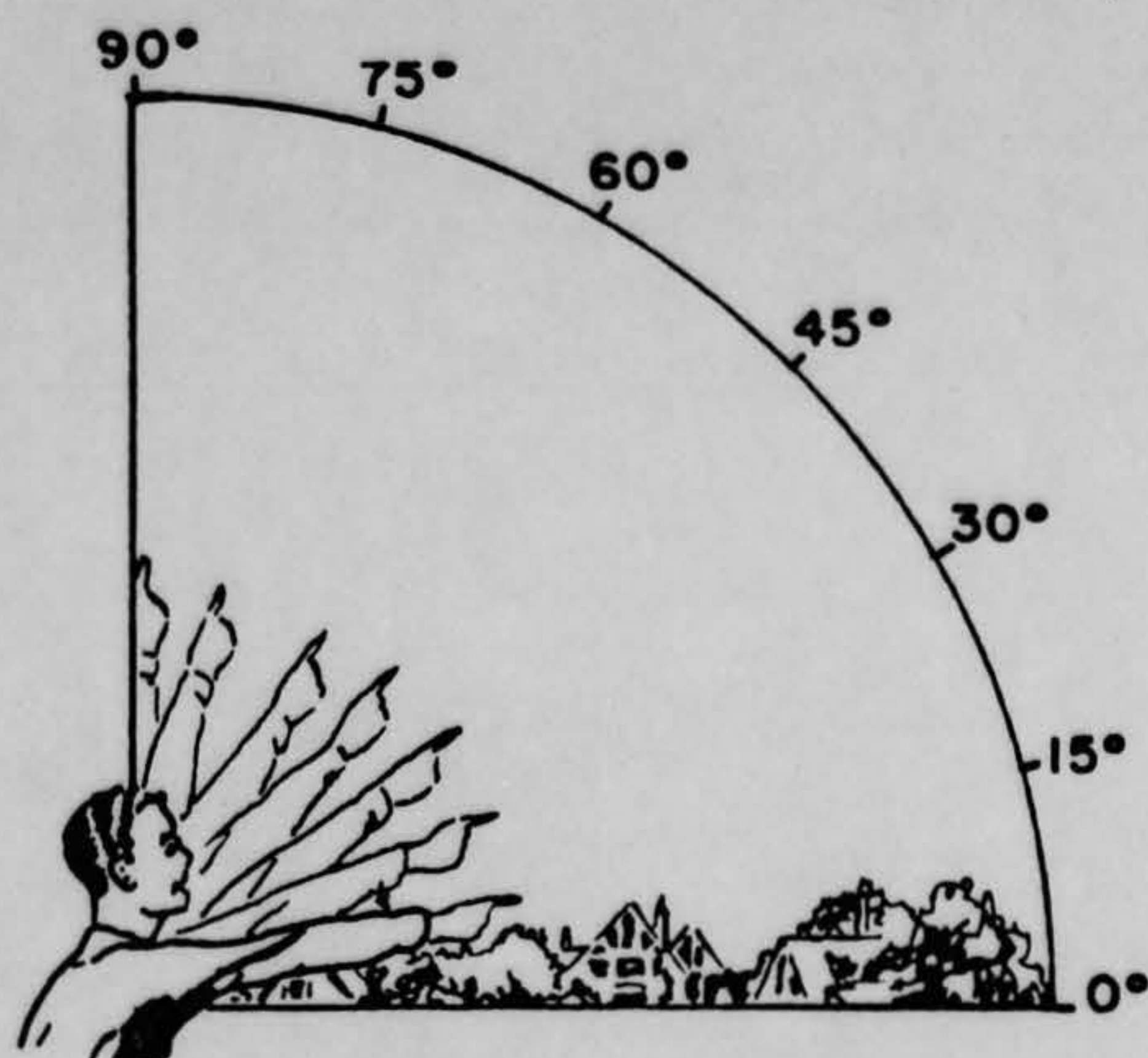
25. Did you observe the object through any of the following?

- |                 |                                      |    |               |       |    |
|-----------------|--------------------------------------|----|---------------|-------|----|
| a. Eyeglasses   | Yes                                  | No | e. Binoculars | Yes   | No |
| b. Sun glasses  | Yes                                  | No | f. Telescope  | Yes   | No |
| c. Windshield   | Yes                                  | No | g. Theodolite | Yes   | No |
| d. Window glass | <input checked="" type="radio"/> 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.

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? \_\_\_\_\_

*Nothing to compare with*

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 | <input checked="" type="radio"/> No | e. Binoculars | Yes   | <input checked="" type="radio"/> No |
| b. Sun glasses  | Yes | <input checked="" type="radio"/> No | f. Telescope  | Yes   | <input checked="" type="radio"/> No |
| c. Windshield   | Yes | <input checked="" type="radio"/> No | g. Theodolite | Yes   | <input checked="" type="radio"/> No |
| d. Window glass | Yes | <input checked="" type="radio"/> 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.

*Aircraft (actually brighter) at about vapor trail altitude*

PROJECT 10073 RECORD

<p>1. DATE - TIME GROUP 24 August 66 25/0300Z</p>	<p>2. LOCATION Dayton, Ohio (w Witnesses)</p>
<p>3. SOURCE Civilian</p>	<p>10. CONCLUSION AIRCRAFT ✓ <i>gpd</i></p>
<p>4. NUMBER OF OBJECTS 3 - 4</p>	<p>Base Operations confirmed that three helicopters departed W-P AFB at 2153 EST. These choppers were on their way to Texas, thus accounting for their westward flight path. The choppers would</p>
<p>5. LENGTH OF OBSERVATION 15 Minutes</p>	<p>11. BRIEF SUMMARY AND ANALYSIS have been over the Dayton area at 2200.</p>
<p>6. TYPE OF OBSERVATION Ground-Visual</p>	<p>Four objects were observed traveling toward the west. When the observers first saw the objects they were stationary, then they moved and stopped and started again in a westerly direction. The objects were in front of some clouds during part of their flight. The colors of the objects were red at all times. Objects were compared to red traffic lights.</p>
<p>7. COURSE Westward</p>	
<p>8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	

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



24 Aug 66,

Hayes

FTD (TDETR) *hl*  
Wright-Patterson AFB, Ohio 45433  
26 September 1966

[REDACTED]  
Dayton, Ohio 45416

Dear [REDACTED]

Reference your unidentified observation of 24 August 1966 of several unidentified flying objects over the Dayton area. Contact was made with Base operations regarding your observation. We were informed that three helicopters landed at Wright-Patterson AFB to refuel at approximately 2030 on 24 August. At 2153 these helicopters departed the base with a final destination of Texas. These helicopters would have been over your area at 2200 hours and heading westward.

According to the description you provided, it is felt that you observed these craft departing Dayton.

Thank you for reporting your observation to the Air Force.

Sincerely,

*H*  
RECTOR QUINTANILLA, Jr, Major, USAF  
Deputy for Technology & Subsystems

OFFICIAL FILE COPY

TDETR

Office of Record

2130 - 2200 hrs

~~9.30~~

Upper Mich

28 - 31 Aug

~~\_\_\_\_\_~~  
~~\_\_\_\_\_~~

Call 1544 Helicopters  
9201

### 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?

24 Aug 1966  
Day Month Year

2. Time of day: 70 —  
Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern  
b. Central  
c. Mountain  
d. Pacific  
e. Other \_\_\_\_\_

(Circle One): a. Daylight Saving  
b. Standard

4. Where were you when you saw the object?

[Redacted]  
Nearest Postal Address

Dayton  
City or Town

Ohio Montgomery  
State or County  
HARRISON TWP

5. How long was object in sight? (Total Duration)

— 15 —  
Hours Minutes Seconds

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

5.1 How was time in sight determined? We knew what time we left house

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. In back of you  
c. To your right  
d. To your left  
e. Overhead  
f. Don't remember



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:

WAS AS BRIGHT AS TRAFFIC SIGNAL

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?           | <input checked="" type="radio"/> Yes | No                                  | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| c. Break up into parts or explode?              | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| d. Give off smoke?                              | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| e. Change brightness?                           | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| f. Change shape?                                | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| g. Flash or flicker?                            | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| h. Disappear and reappear?                      | Yes                                  | <input checked="" type="radio"/> No | Don't know |

14. Did the object disappear while you were watching it? If so, how? *when we saw it it was stationary then it moved and stopped and started again in a westerly direction. We went after some field glasses and when we came back outside we could not find them again*

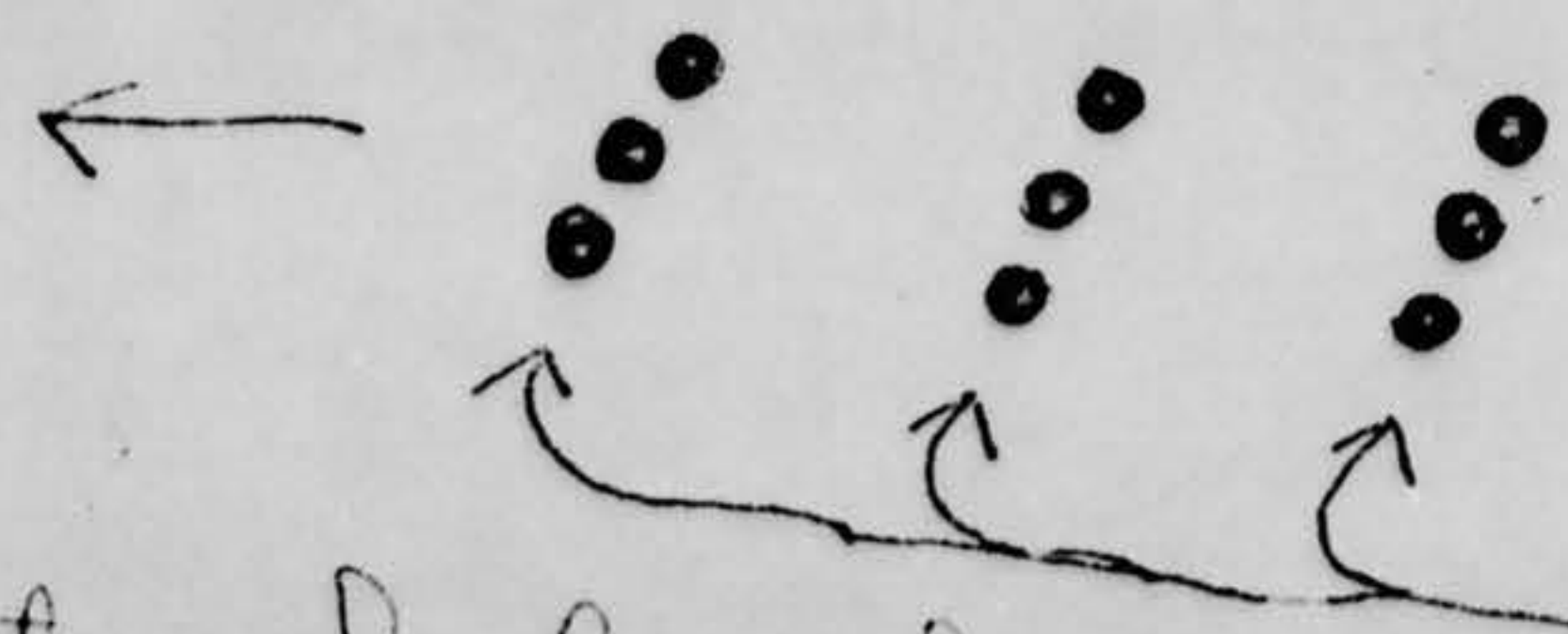
15. Did the object move behind something at any time, particularly a cloud?  
(Circle One): Yes  No  Don't Know. IF you answered YES, then tell what it moved behind: *Not at any time while we watched did they go behind clouds*

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: *The objects were in front of clouds all the time they were in sight*

17. Tell in a few words the following things about the object:  
a. Sound *It made no audible sound*  
b. Color *the color of all the objects were red*

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head? *About three quarters of the object would have been 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.



*Each of the three objects had three red lights apiece on them. All that was visible was the red lights*

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? 5 miles

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 located on right side of street  
open field on left.

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? 15-20 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

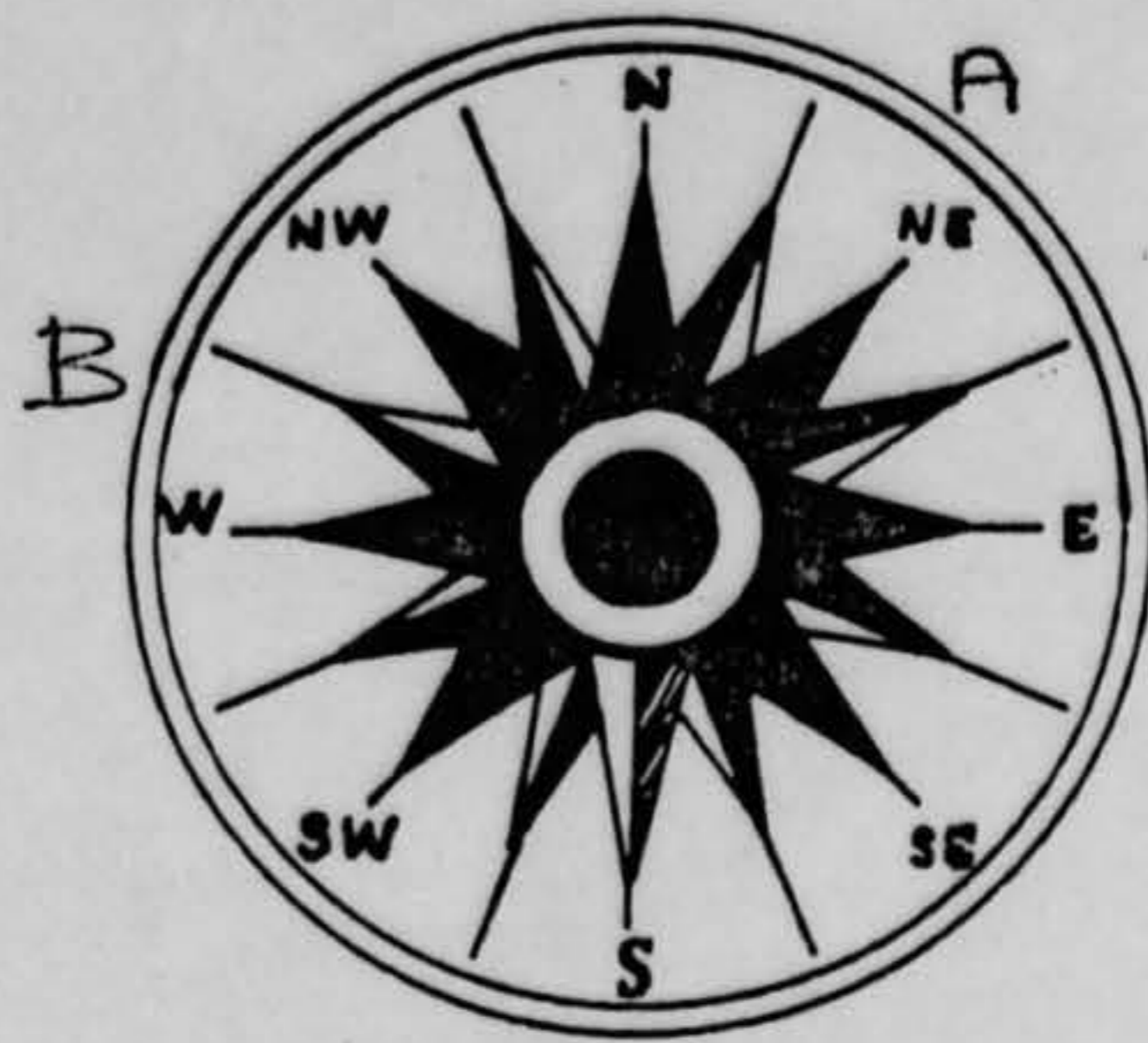
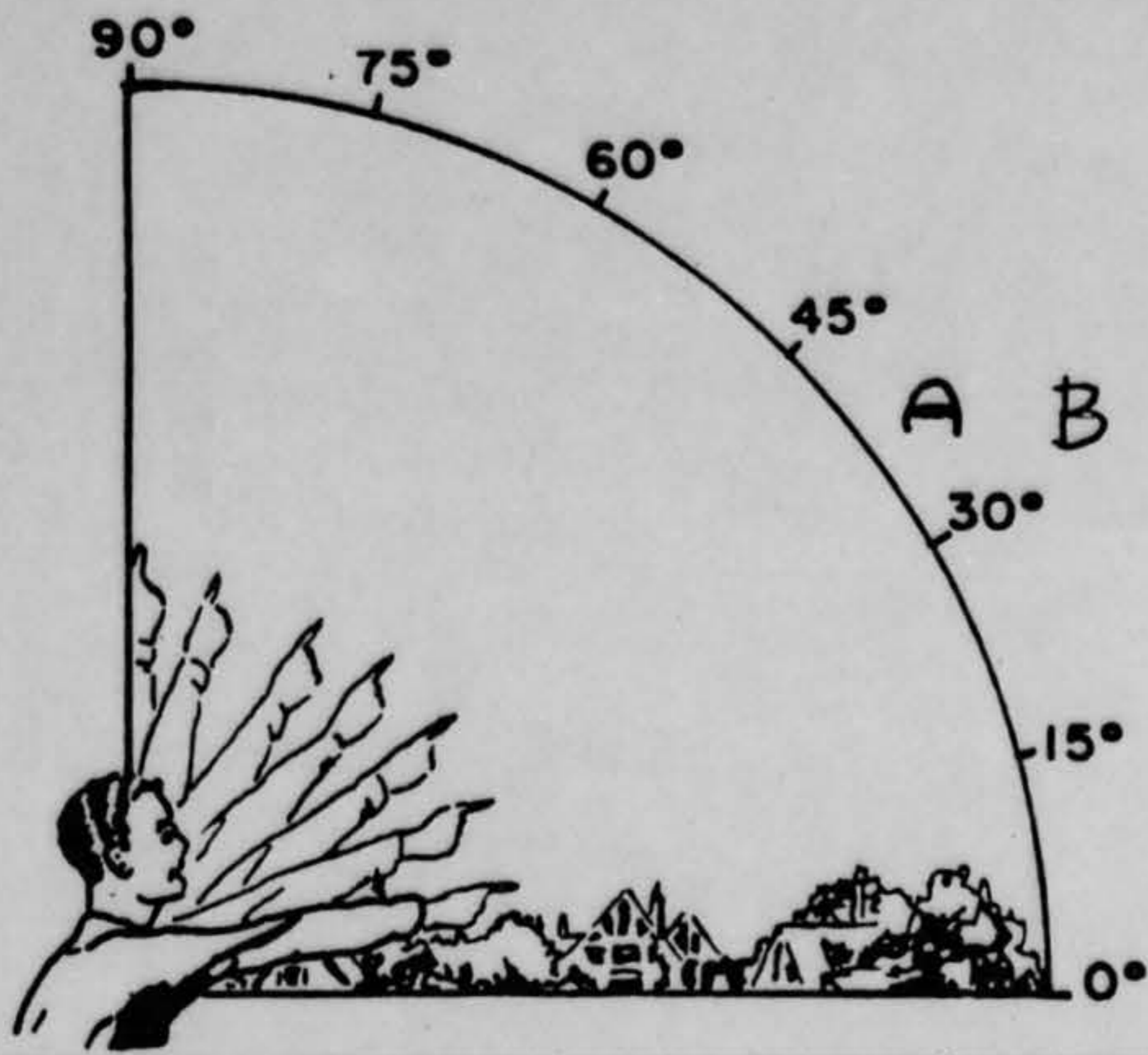
No

h. Other open window

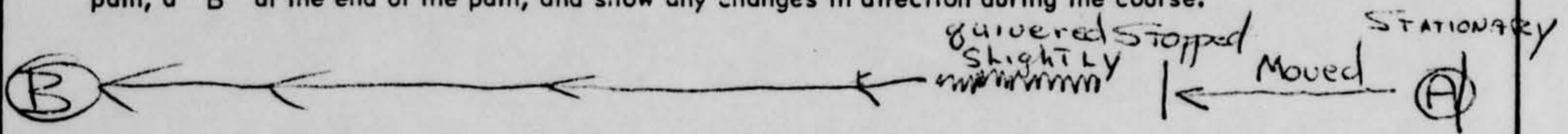
26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

A three light red traffic signal →   
what we saw would be the equivalent  
of just the three red lights.

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.

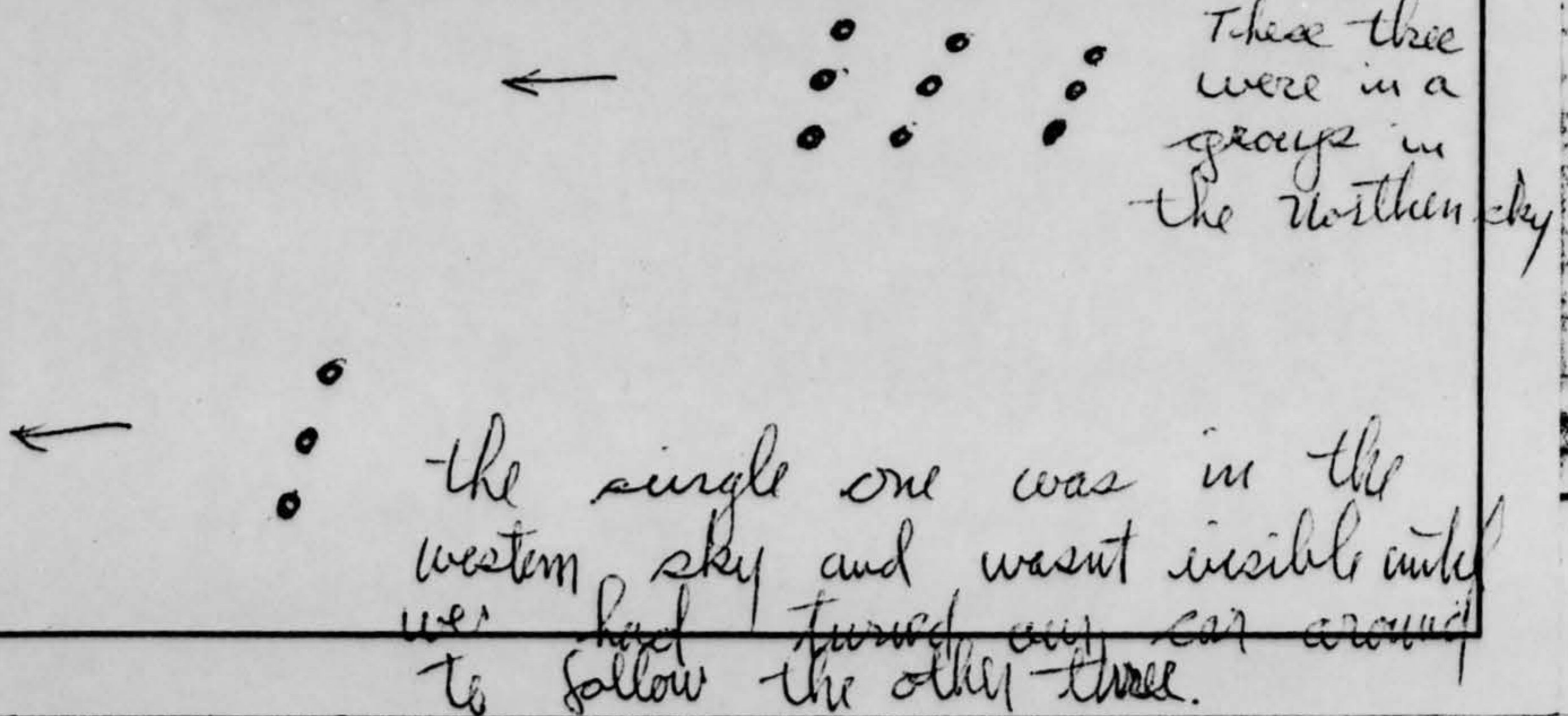


28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



29. IF there was MORE THAN ONE object, then how many were there? 4

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.

Have never seen any THING like it before.  
Have never seen it on a PLANE or any other CRAFT.

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]  
[REDACTED] Dr  
DAYTON Ohio  
UPPER APT.

32. Please give the following information about yourself:

NAME [REDACTED] [REDACTED] [REDACTED]  
Last Name First Name Middle Name  
ADDRESS [REDACTED] DAYTON 16 OHIO  
Street City Zone State  
TELEPHONE NUMBER [REDACTED] AGE 20 SEX M

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

I do some OCCASIONAL STARGAZING WITH A Refractor type Telescope. I've SPENT ENOUGH TIME out-of-doors TO KNOW I NEVER SEEN PLANES WITH THAT KIND of Light CONFIGURATION.

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

24 8 66 FIRST TO THE  
Day Month Year THEN TO WPAFB - UFO Section  
DAYTON DAILY New

34. Date you completed this questionnaire:

28      8      66  
 Day      Month      Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

I feel that if these craft or objects were of the airplane nature they would have had to been something which could travel, stand still, move slightly up and down, and travel on again.

They always moved forward and at no time moved in reverse.

If you find a logical explanation I would and I know my friend would be very interested in finding out what they were I think yes.

~~\_\_\_\_\_~~ ~~\_\_\_\_\_~~



Dayton, Ohio

24 Aug-66

FTD (TDETR)/hl  
Wright-Patterson AFB, Ohio 45433  
26 August 1966

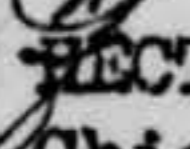
[REDACTED]  
Dayton, Ohio 45416

Dear [REDACTED]

Reference your unidentified observation of 24 August 1966. The information which we have received is not sufficient for evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided.

We wish to thank you for reporting your observation to the Air Force.

Sincerely,

  
HECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Project Blue Book

OFFICIAL FILE COPY

TDETR  
Office of Record



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?

24 Day 7/16 Month 1966 Year

2. Time of day: 2200 Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern b. Central c. Mountain d. Pacific e. Other

(Circle One): a. Daylight Saving Standard b. Standard

4. Where were you when you saw the object?

[Redacted] Rd. Nearest Postal Address

HARRISON TOWNSHIP, MONT. City or Town State or County COUNTY

5. How long was object in sight? (Total Duration)

10-15 Hours Minutes Seconds

- a. 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 X No

6. What was the condition of the sky?

DAY a. Bright b. Cloudy

NIGHT a. Bright b. Cloudy

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

- (Circle One): a. In front of you b. In back of you c. To your right d. To your left e. Overhead f. Don't remember

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:

TRAFFIC SIGNAL OR TOWER BEACON

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?           | <input checked="" type="radio"/> Yes | No                                  | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| c. Break up into parts or explode?              | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| d. Give off smoke?                              | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| e. Change brightness?                           | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| f. Change shape?                                | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| g. Flash or flicker?                            | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| h. Disappear and reappear?                      | Yes                                  | <input checked="" type="radio"/> 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 \_\_\_\_\_

NONE

b. Color \_\_\_\_\_

RED (LIKE TRAFFIC SIGNAL)

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? 10 mile

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? *with*
- c. In open countryside? *suburban area*
- 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     | <input checked="" type="radio"/> c. East | e. South     | g. West      |
| b. Northeast | d. Southeast                             | f. Southwest | h. Northwest |

24.2 How fast were you moving? 10-15 miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One) Yes  No

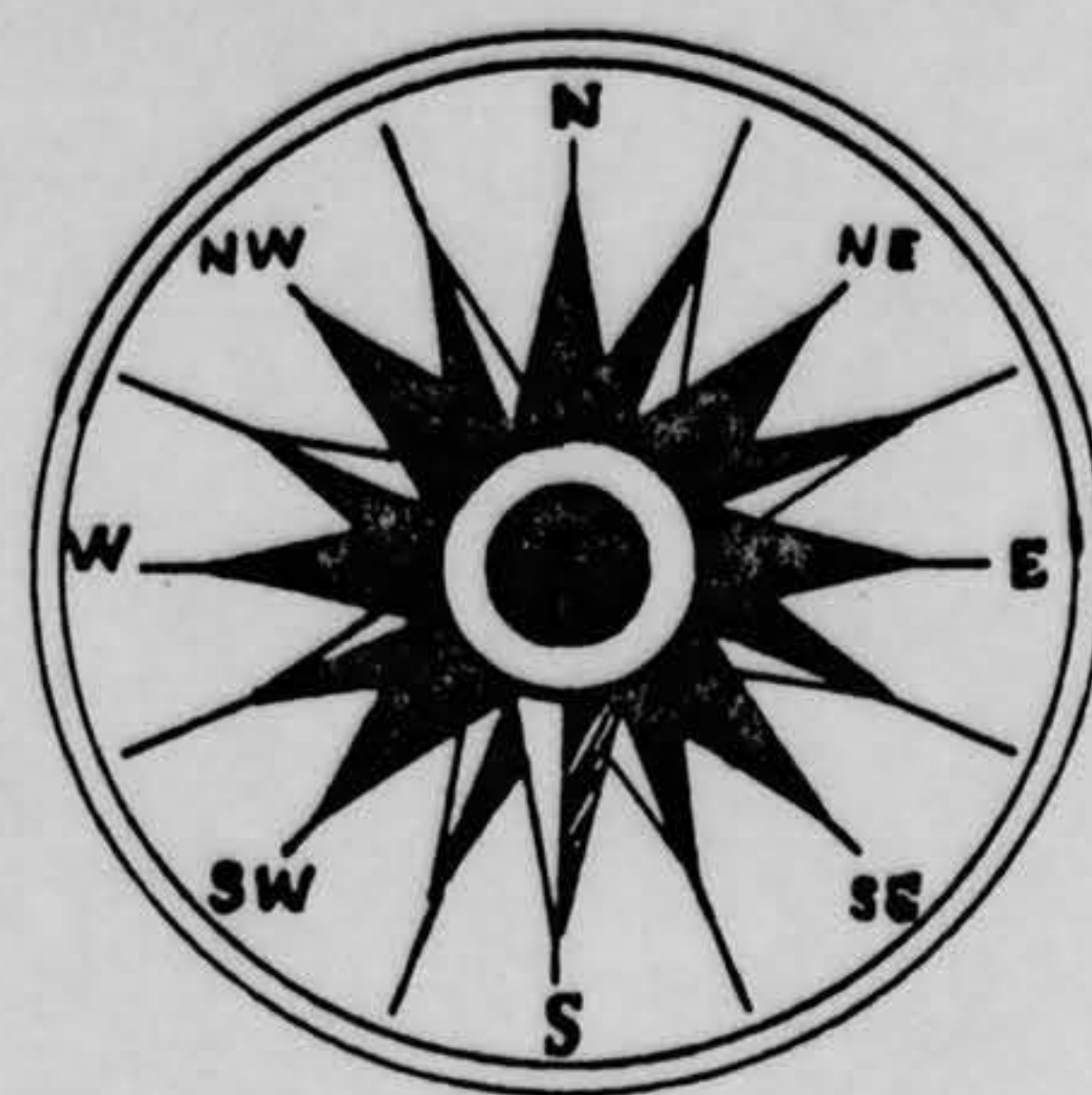
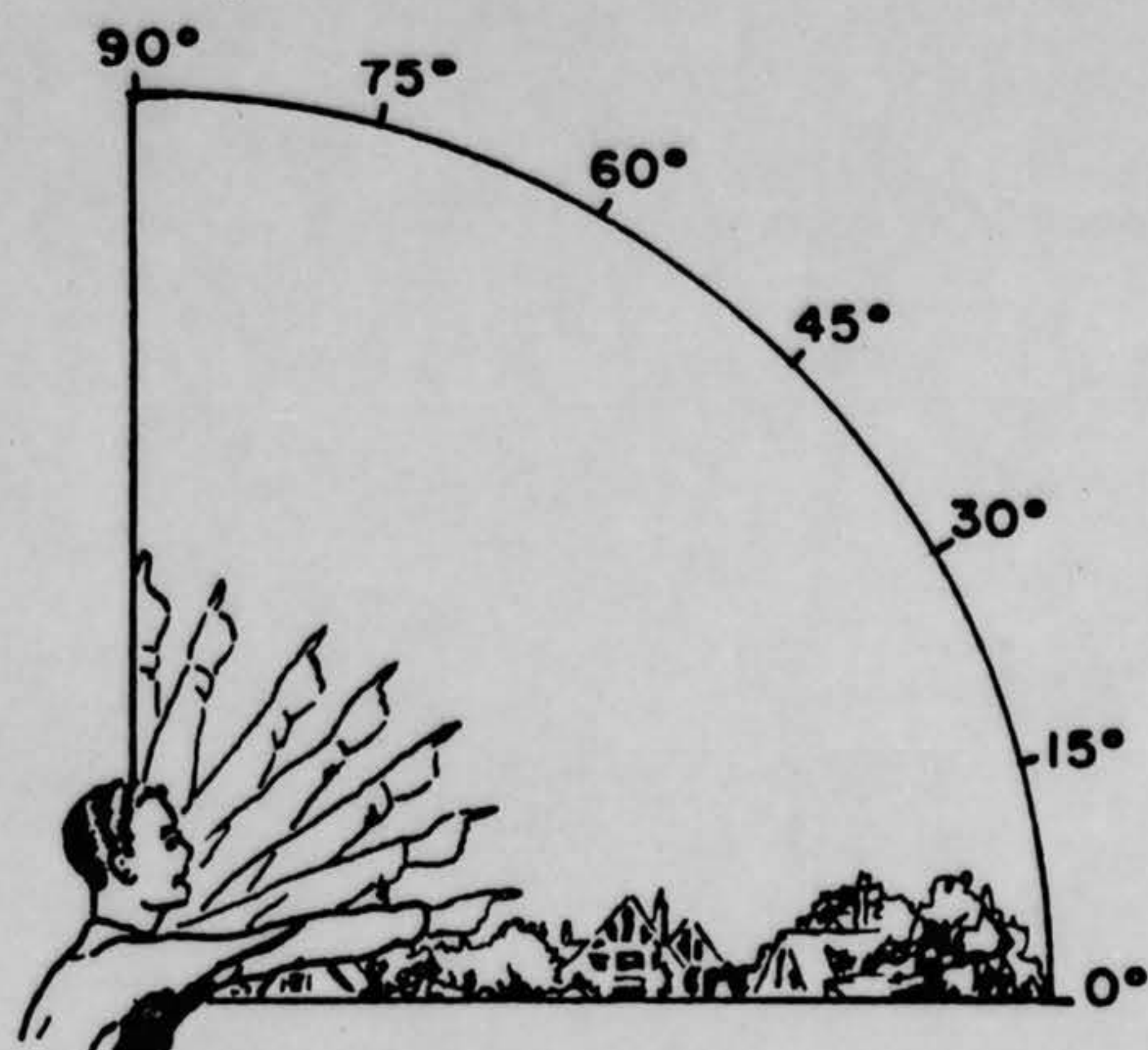
25. Did you observe the object through any of the following?

- |                 |                                      |                                     |                |                           |                                     |
|-----------------|--------------------------------------|-------------------------------------|----------------|---------------------------|-------------------------------------|
| a. Eyeglasses   | Yes <input checked="" type="radio"/> | No <input type="radio"/>            | e. Binoculars  | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| b. Sun glasses  | Yes <input type="radio"/>            | No <input checked="" type="radio"/> | f. Telescope   | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| c. Windshield   | Yes <input type="radio"/>            | No <input checked="" type="radio"/> | g. Theodolite  | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| d. Window glass | Yes <input type="radio"/>            | No <input checked="" type="radio"/> | 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.

*4 objects each consisting 3 red lights arranged in a line at 45° to the horizontal. Hovered NE from us, then moved toward west then slightly up & down.*

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? 4  
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:

*[Redacted]*  
*[Redacted] RD. (APT.) (JUST MOVED IN)*  
*Has. Telephone*

32. Please give the following information about yourself:

NAME	<u>[Redacted]</u>	<u>[Redacted]</u>	<u></u>
	Last Name	First Name	Middle Name
ADDRESS	<u>[Redacted]</u>	<u>DAYTON</u>	<u>OHIO</u>
	Street	City	Zone State
TELEPHONE NUMBER	<u>[Redacted]</u>	AGE <u>20</u>	SEX <u>M</u>
			<u>45416</u>

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

*Will be home at 1730 on FRIDAY  
 26 AUG.*

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

24 AUG 1966  
 Day Month Year  
*MAJ WONG / FTD OD*

8 Sept. 66

Contact was made with the FAA at WP AFB, Ohio (70042). They only have records of aircraft that have filed an IFR record.

There was a Lockheed Electra that ~~took-~~ departed the Dayton Cox Airport at 2158. This aircraft would have proceeded toward the north. There were no aircraft flying in formation that the FAA knew of at the time of the sighting.

*call base operations*

16 Sept.

Contact with Base operations about A/C in area

*3* presidential helicopters to west

Do WP to refuel

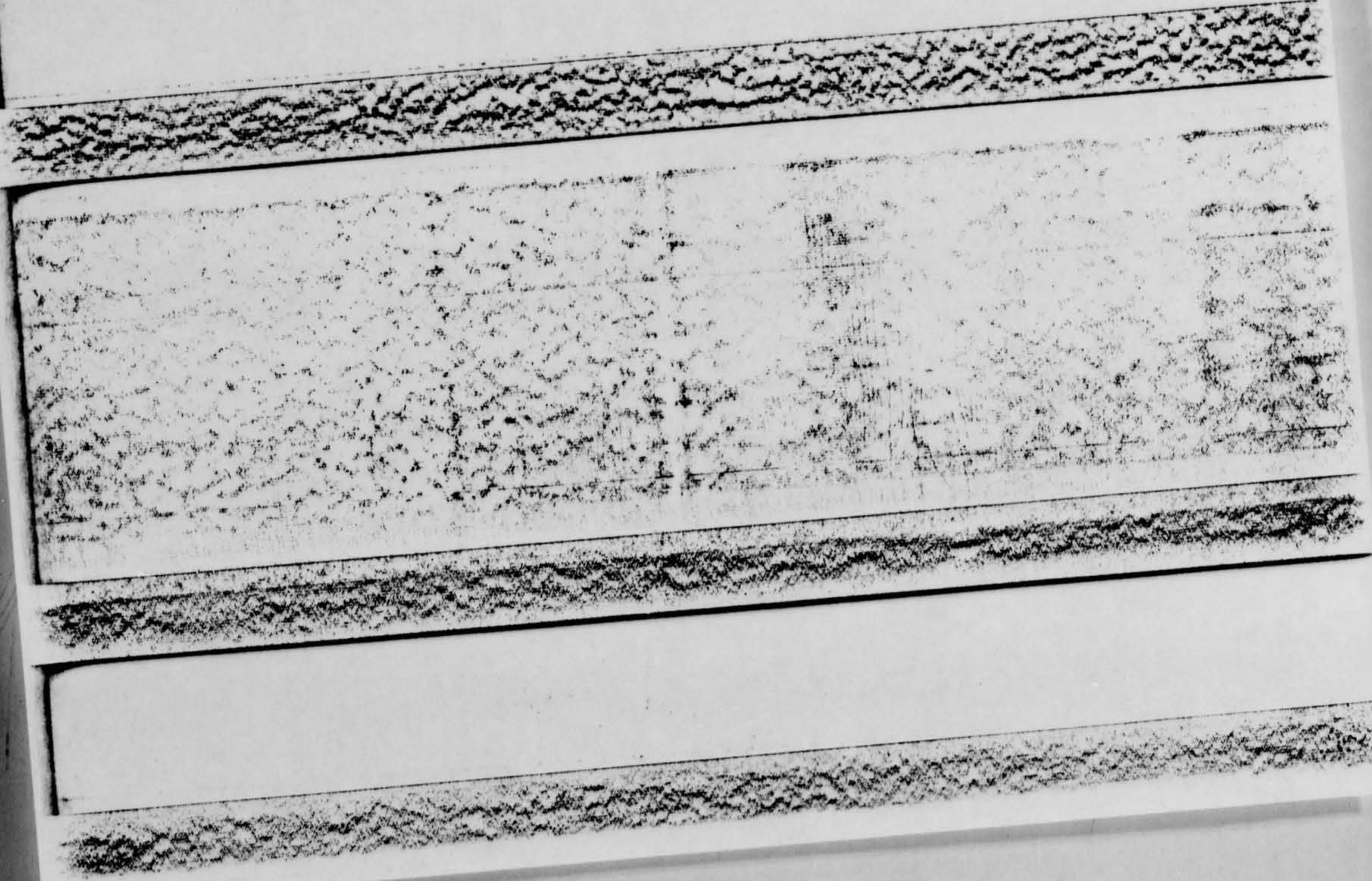
took off 953 *hr*

3 helicopters landed at WP to refuel. They took off at 2153, departing to the west with a final destination of Texas. These a/c would have been ~~reported~~ over the Dayton area at 2200 and heading westward. The description of the objects reported is consistent with that of a helicopter with its ~~on~~ lights on.

PROJECT 10073 RECORD

1. DATE - TIME GROUP 28 August 66 29/0130Z	2. LOCATION Dayton, Ohio
3. SOURCE Civilian	10. CONCLUSION Satellite (ECHO I) <i>znd</i>
4. NUMBER OF OBJECTS One	ECHO I was north of city at time of observation (0128Z)
5. LENGTH OF OBSERVATION 5 Minutes	11. BRIEF SUMMARY AND ANALYSIS Observer noted star like object moving toward the east. Observer was facing north when observed alleged UFO. Object was visible for approximately 5 minutes.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE E	
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.





going East

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

like a star stopped once

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

\_\_\_\_\_

12. The edges of the object were:

(Circle One): a. Fuzzy or blurred

- b. Like a bright star
- c. Sharply outlined
- d. Don't remember

e. Other \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

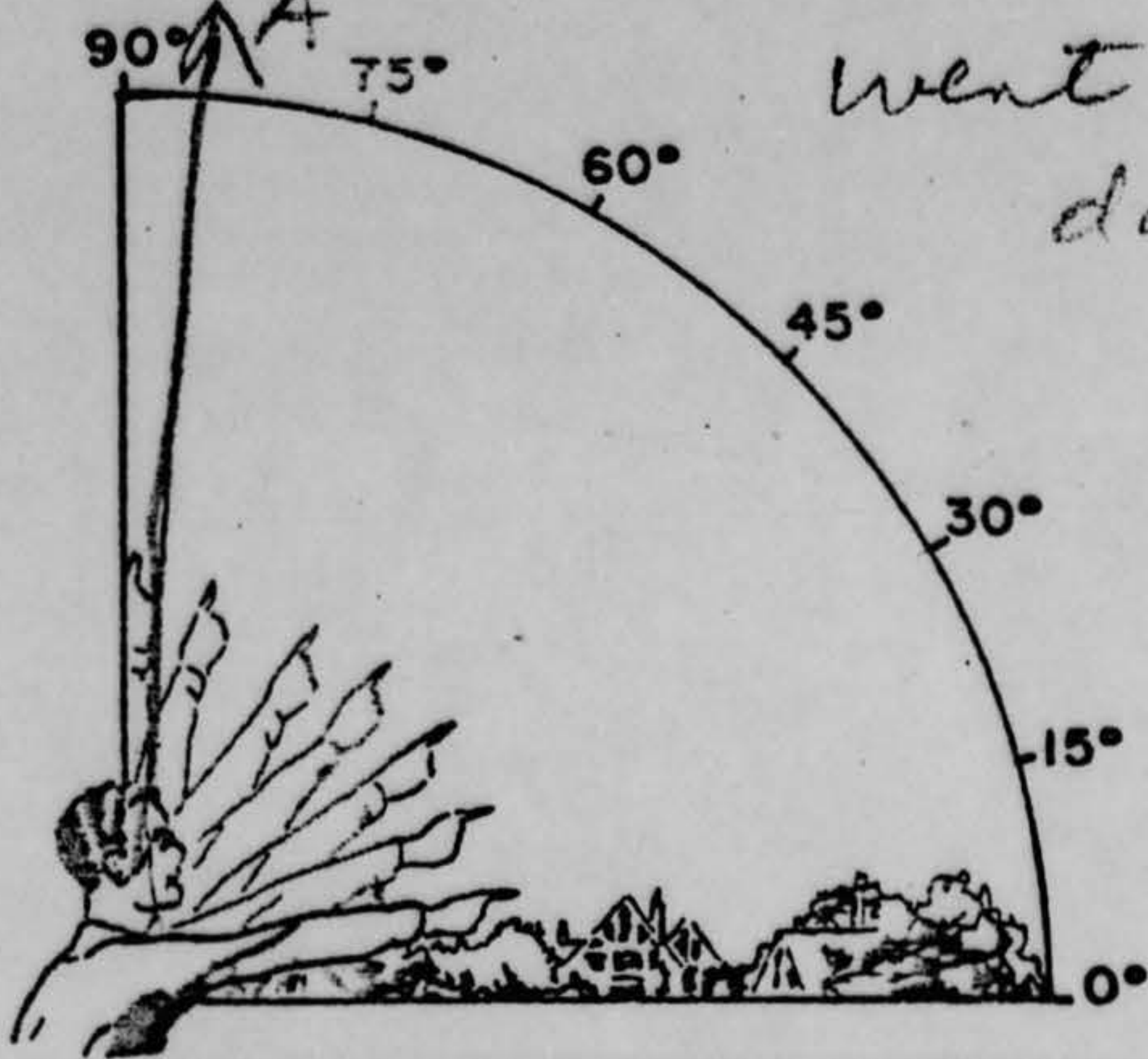
13. Did the object:

(Circle One for each question)

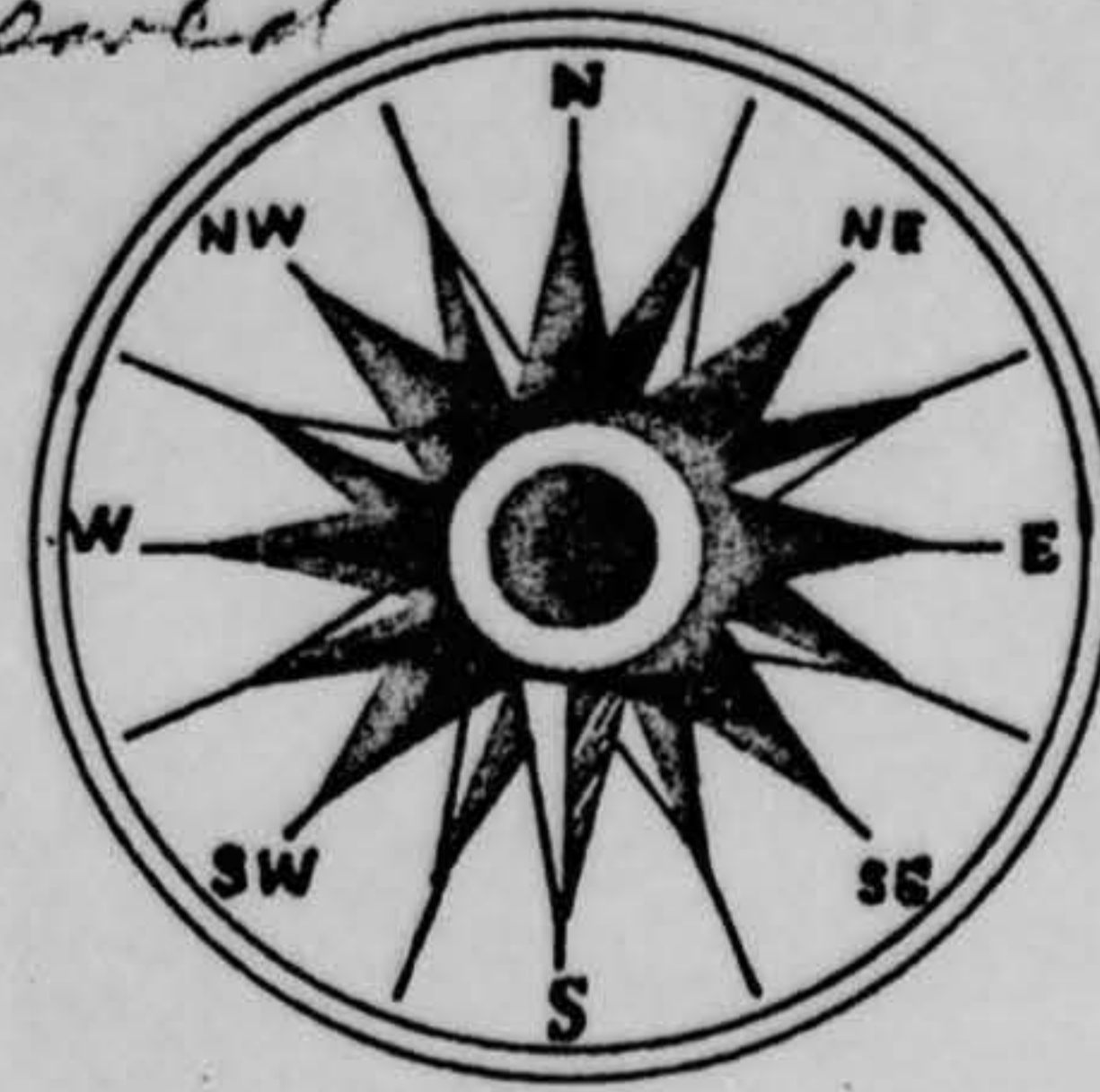
- a.  Appear to stand still at any time?
- b.  Suddenly speed up and rush away at any time?
- c. Break up into parts or explode?
- d. Give off smoke?
- e. Change brightness?
- f. Change shape?
- g. Flash or flicker?
- h. Disappear and reappear?

<input checked="" type="radio"/> Yes	No	Don't know
Yes	No	<input checked="" type="radio"/> Don't know
Yes	No	Don't know
Yes	No	Don't know
Yes	<input checked="" type="radio"/> No	Don't know
Yes	<input checked="" type="radio"/> No	Don't know
<input checked="" type="radio"/> Yes	No	Don't 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.



*went up when  
disappeared*



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.

*NA*

**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.

<p>1. When did you see the object?</p> <p style="text-align: center;"> <u>28</u>      <u>Aug</u>      <u>66</u>  <small>Day                  Month                  Year</small> </p>	<p>2. Time of day: <u>2030</u></p> <p style="text-align: center;"><small>Hour                  Minutes</small></p> <p>(Circle One):      A.M.      or      P.M.</p>
<p>3. Time Zone:</p> <p>(Circle One): a. <u>Eastern</u>          b. Central          c. Mountain          d. Pacific          e. Other _____</p> <p>(Circle One): a. Daylight Saving          b. <u>Standard</u></p>	
<p>4. Where were you when you saw the object?</p> <p style="text-align: center;"><u>6 BLOCKS - SWIN</u></p> <p style="text-align: center;"> <u>W. 3rd</u>      <u>DAYTON</u>      <u>Ohio</u>  <small>Nearest Postal Address      City or Town      State or County</small> </p>	
<p>5. How long was object in sight? (Total Duration)</p> <p style="text-align: center;">         _____      <u>5</u>      _____  <small>Hours                  Minutes                  Seconds</small> </p> <p>a. Certain                                  c. Not very sure          b. Fairly certain                        d. Just a guess</p> <p>5.1 How was time in sight determined? _____</p> <p>5.2 Was object in sight continuously?      Yes <input checked="" type="checkbox"/>      No _____</p>	
<p>6. What was the condition of the sky?</p> <p style="text-align: center;">         DAY                                  <u>NIGHT</u>          a. Bright                              a. <u>Bright</u>          b. Cloudy                              b. Cloudy       </p>	
<p>7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?</p> <p>(Circle One): a. In front of you                  d. To your left          b. In back of you                              e. Overhead          c. To your right                                f. Don't remember</p>	

14. Did the object disappear while you were watching it? If so, how?

*yes*

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 \_\_\_\_\_

b. Color \_\_\_\_\_

*as stone*

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.

*Facing north - move west to east  
 for last 1/2  
 return handle of big dipper*

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     | 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?

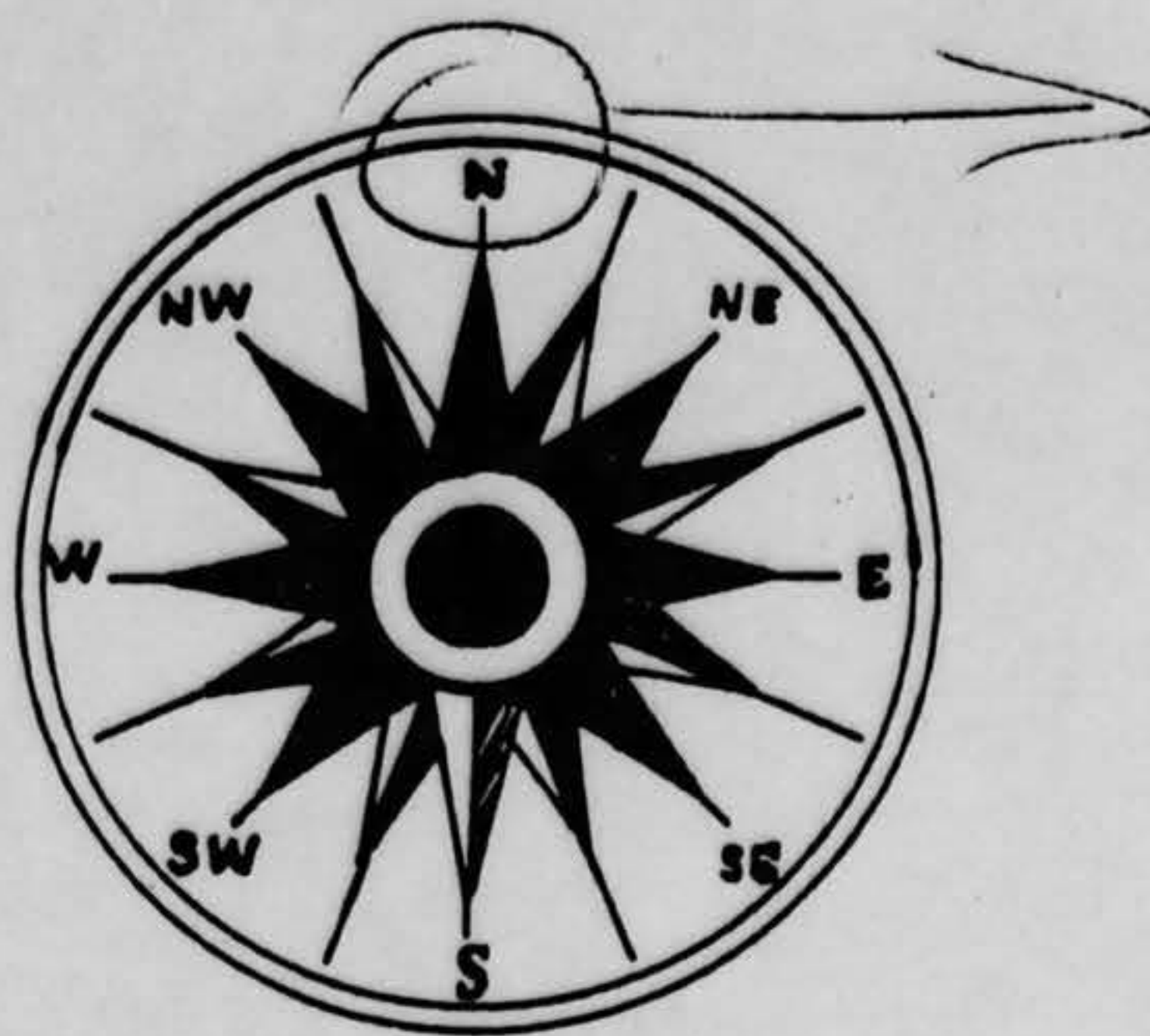
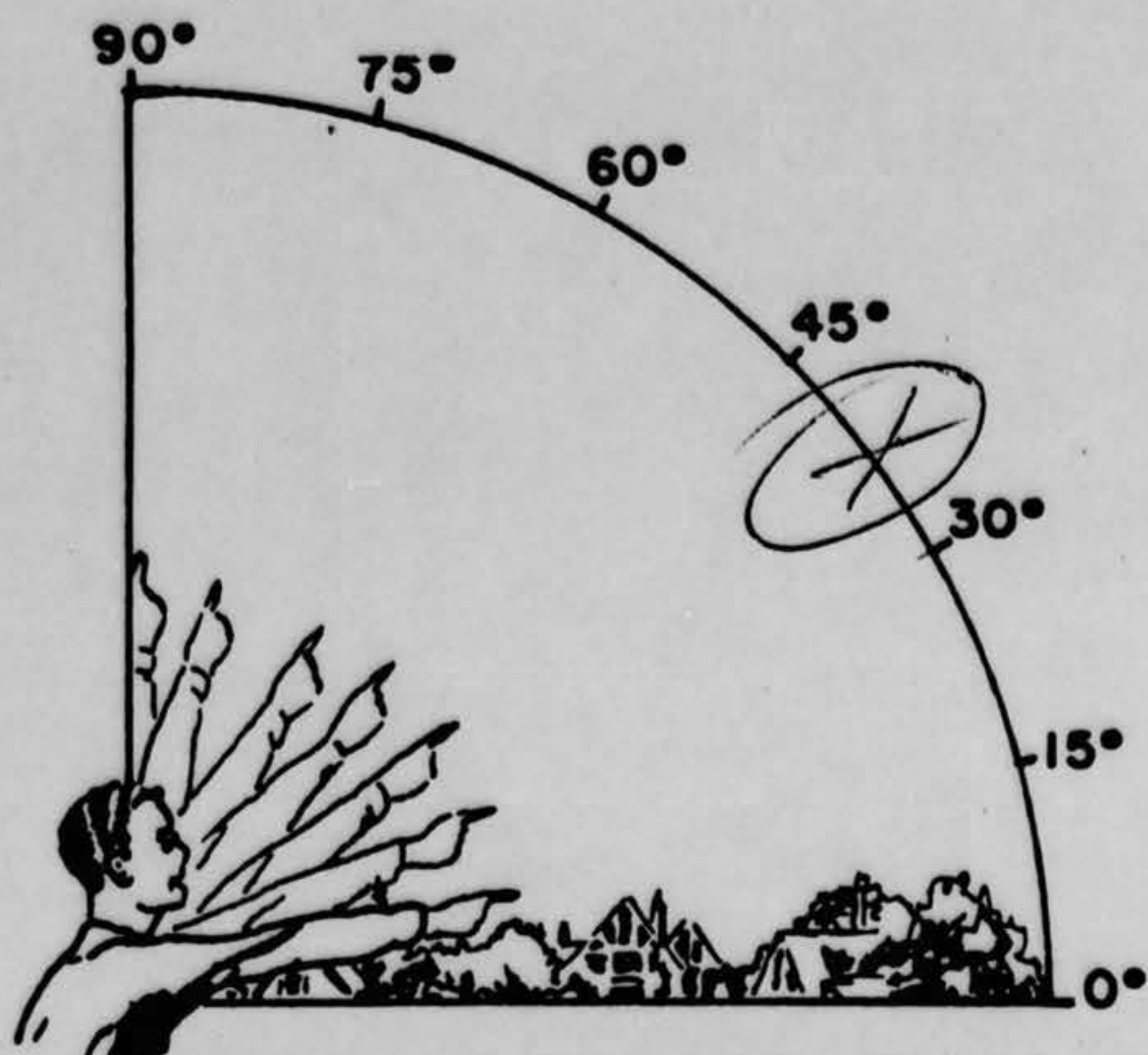
(Circle One) Yes  No

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

- |                 |                           |                                     |                |                           |                                     |
|-----------------|---------------------------|-------------------------------------|----------------|---------------------------|-------------------------------------|
| a. Eyeglasses   | Yes <input type="radio"/> | No <input checked="" type="radio"/> | e. Binoculars  | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| b. Sun glasses  | Yes <input type="radio"/> | No <input checked="" type="radio"/> | f. Telescope   | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| c. Windshield   | Yes <input type="radio"/> | No <input checked="" type="radio"/> | g. Theodolite  | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| d. Window glass | Yes <input type="radio"/> | No <input checked="" type="radio"/> | 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.

PROJECT 10073 RECORD

<b>1. DATE - TIME GROUP</b> 28 August 66 29/0315Z	<b>2. LOCATION</b> Dayton, Ohio
<b>3. SOURCE</b> Civilian	<b>10. CONCLUSION</b> Possible (AIRCRAFT) ✓ <i>ym</i>
<b>4. NUMBER OF OBJECTS</b> One	No data presented to indicate object could not have been an A/C.
<b>5. LENGTH OF OBSERVATION</b> 20 Seconds ✓	<b>11. BRIEF SUMMARY AND ANALYSIS</b> Observer noted 3 lights (green or blue) and (orange or red) lights. The object appeared fuzzy or blurred with no definite shape. Object was traveling toward the north and disappeared behind a house.
<b>6. TYPE OF OBSERVATION</b> Ground-Visual	
<b>7. COURSE</b> N	
<b>8. PHOTOS</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>9. PHYSICAL EVIDENCE</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

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?  
28 Day    AV67 Month    66 Year

2. Time of day: 2215  
Hour    Minutes  
(Circle One): A.M. or P.M.

3. Time Zone: (Circle One): a. Eastern b. Central c. Mountain d. Pacific e. Other  
(Circle One): a. Daylight Saving b. Standard

4. Where were you when you saw the object?  
[Redacted] Nearest Postal Address    Dayton City or Town    State or County

5. How long was object in sight? (Total Duration)    20 Seconds  
a. 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    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



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

*3 lights*

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

*green or blue light  
blinked*

11.1 Compare brightness to some common object:

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_

13. Did the object:

(Circle One for each question)

- |   |                                      |                                     |            |
|---|--------------------------------------|-------------------------------------|------------|
| a. Appear to stand still at any time?           | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes                                  | <input type="radio"/> No            | Don't know |
| c. Break up into parts or explode?              | Yes                                  | <input type="radio"/> No            | Don't know |
| d. Give off smoke?                              | Yes                                  | <input type="radio"/> No            | Don't know |
| e. Change brightness?                           | Yes                                  | <input type="radio"/> No            | Don't know |
| f. Change shape?                                | Yes                                  | <input type="radio"/> No            | Don't know |
| g. Flash or flicker?                            | <input checked="" type="radio"/> Yes | <input type="radio"/> No            | Don't know |
| h. Disappear and reappear?                      | <input checked="" type="radio"/> Yes | <input type="radio"/> No            | Don't know |

*over house*

14. Did the object disappear while you were watching it? If so, how?

*went behind house*

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 *green or blue and orange or red lights*

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?

*unk*

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.

*blurred*

20. Do you think you can estimate the speed of the object?

(Circle One)

Yes

No

*Very fast*

IF you answered YES, then what speed would you estimate? \_\_\_\_\_

21. Do you think you can estimate how far away from you the object was?

(Circle One)

Yes

No

IF you answered YES, then how far away would you say it was? \_\_\_\_\_

22. Where were you located when you saw the object?

(Circle One):

a. Inside a building

b. In a car

c. Outdoors

d. In an airplane (type) \_\_\_\_\_

e. At sea

f. Other \_\_\_\_\_

23. Were you (Circle One)

a. In the business-section of a city?

b. In the residential section of a city?

c. In open countryside?

d. Near an airfield?

e. Flying over a city?

f. Flying over open country?

g. Other \_\_\_\_\_

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

a. North

c. East

e. South

g. West

b. Northeast

d. Southeast

f. Southwest

h. Northwest

24.2 How fast were you moving? \_\_\_\_\_ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)

Yes

No

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

a. Eyeglasses

Yes

No

e. Binoculars

Yes

No

b. Sun glasses

Yes

No

f. Telescope

Yes

No

c. Windshield

Yes

No

g. Theodolite

Yes

No

d. Window glass

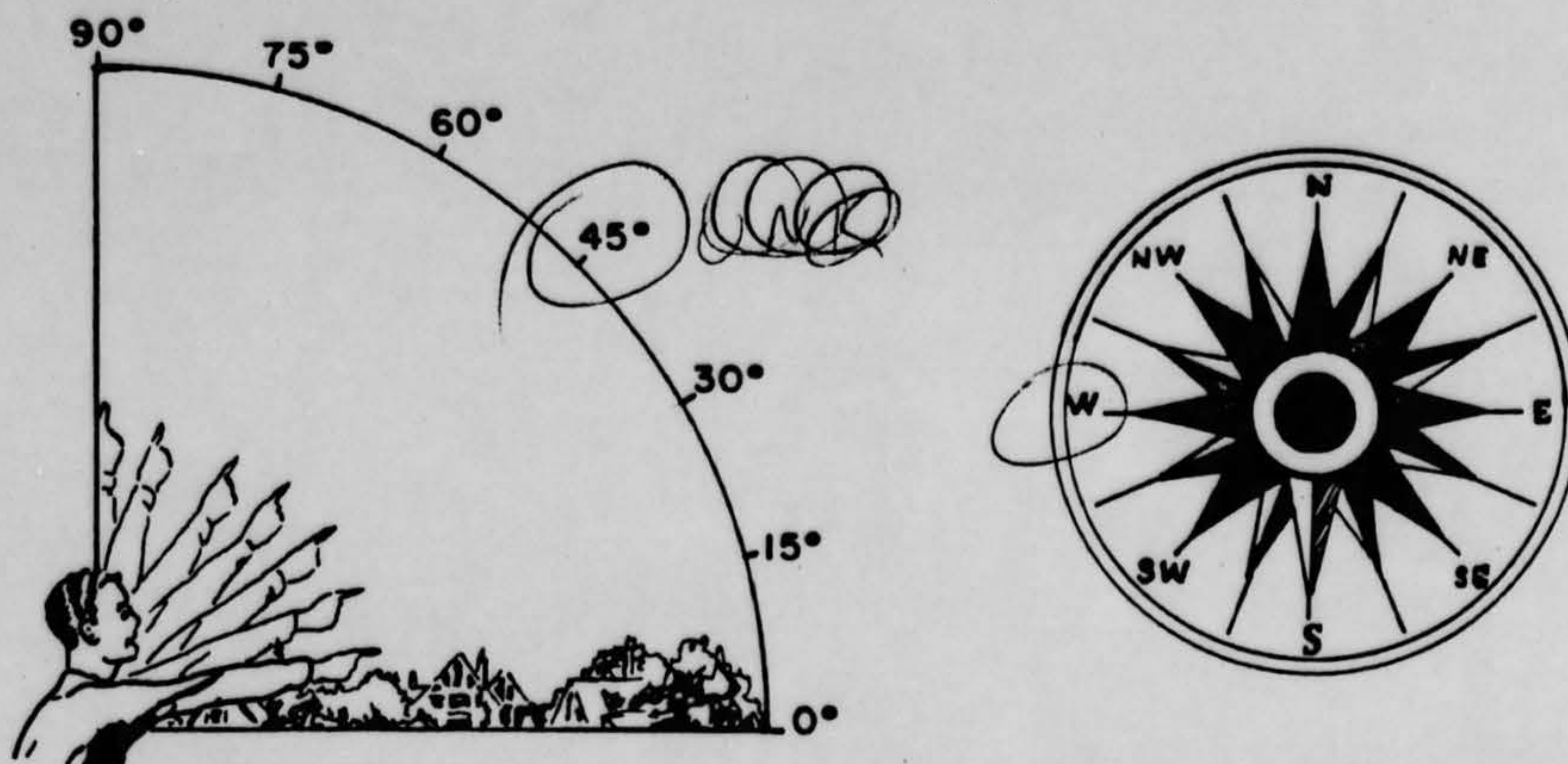
Yes

No

h. Other \_\_\_\_\_

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

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

Object went from south  
to north

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.

3 lights

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]  
[Redacted] Ohio  
[Redacted]  
Middletown, Ohio

32. Please give the following information about yourself:

[Redacted]  
Last Name First Name Middle Name  
ADDRESS [Redacted] Middletown Ohio  
Street City Zone State  
TELEPHONE NUMBER [Redacted] AGE 33 SEX M

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

Sailing, NAVY, Foot marks on

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

3 Aug 1966  
Day Month Year

FTD duty officer  
AT 2000

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

*no*

31. Was anyone else with you at the time you saw the object? (Circle One) Yes  No

31.1 IF you answered YES, did they see the object too? (Circle One) Yes  No

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

NAME \_\_\_\_\_

Last Name

First Name

Middle Name

ADDRESS \_\_\_\_\_

Street

City

Zone

State

TELEPHONE NUMBER \_\_\_\_\_ AGE 31 SEX M

*home after 330 PM*

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

*has seen photographs of aircraft*

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

\_\_\_\_\_

Day

Month

Year

*OP*

PROJECT 10073 RECORD

<b>1. DATE - TIME GROUP</b> 29 August 66 30/0215Z	<b>2. LOCATION</b> Dayton, Ohio
<b>3. SOURCE</b> Civilian	<b>10. CONCLUSION</b> Possible (SATELLITE) ✓ <i>glt</i>
<b>4. NUMBER OF OBJECTS</b> One	ECHO I was over area at 0150Z (45N - 89W)
<b>5. LENGTH OF OBSERVATION</b> 10 Minutes	<b>11. BRIEF SUMMARY AND ANALYSIS</b> Observers noted nothing more than a light such as a miniature full moon in motion. Object was white in color and was moving eastward. Object could compare with a distant head light of a car.
<b>6. TYPE OF OBSERVATION</b> Ground-Visual	Description is consistent with that of a satellite.
<b>7. COURSE</b> E	
<b>8. PHOTOS</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>9. PHYSICAL EVIDENCE</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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?

29 Aug 66  
Day Month Year

2. Time of day: 2/15  
Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a Eastern  
b. Central  
c. Mountain  
d. Pacific  
e. Other \_\_\_\_\_

(Circle One): a. Daylight Saving  
b Standard

4. Where were you when you saw the object?

[Redacted] Dayton, Ohio Ohio  
Nearest Postal Address City or Town State or County

5. How long was object in sight? (Total Duration)

— 10 —  
Hours Minutes Seconds

a. 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  
b. Cloudy

occasional cloud

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



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:

A distant head light on a car.

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                                  | <input checked="" type="radio"/> No | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| c. Break up into parts or explode?              | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| d. Give off smoke?                              | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| e. Change brightness?                           | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| f. Change shape?                                | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| g. Flash or flicker?                            | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| h. Disappear and reappear?                      | <input checked="" type="radio"/> Yes | No                                  | Don't know |

14. Did the object disappear while you were watching it? If so, how?

Once — behind a clearly defined cloud.

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 NA  
 b. Color white light

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

larger than the most distinct star.

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails.

Place an arrow beside the drawing to show the direction the object was moving.

merely a light object such  
 as a miniature full moon.  
 in motion

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? No

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? A considerable distance

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

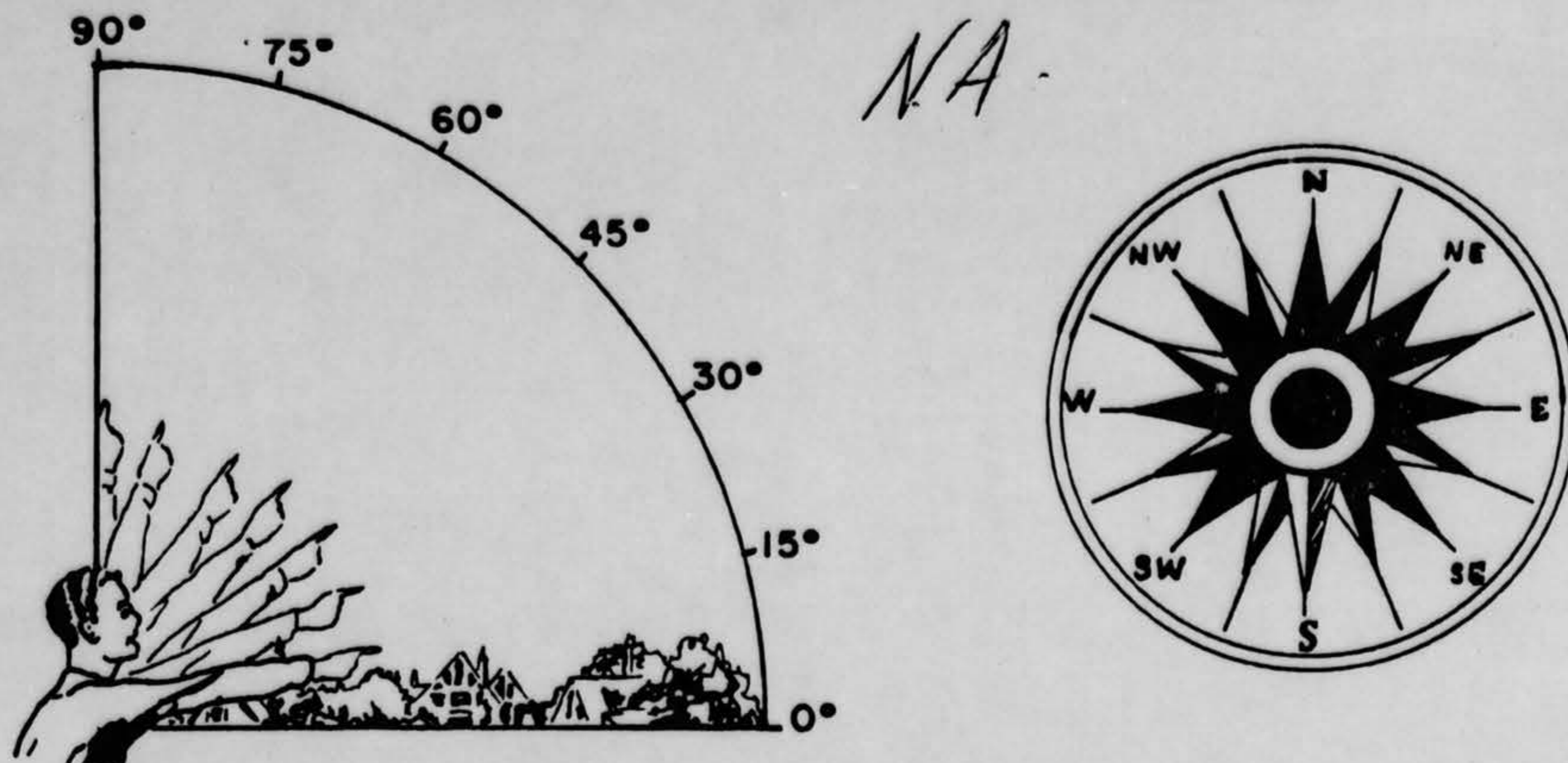
25. Did you observe the object through any of the following?

- |                 |     |    |                |                                      |    |
|-----------------|-----|----|----------------|--------------------------------------|----|
| a. Eyeglasses   | Yes | No | e. Binoculars  | <input checked="" type="radio"/> 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 head light at a few miles distance

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.

*Initial Location — in southwest quadrant*  
*Heading 030 Mag.*  
*AT 12 o'clock position it changed*  
*course to approx 90° Mag.*  
*Due East.*

29. IF there was MORE THAN ONE object, then how many were there? 1  
 Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.





34. Date you completed this questionnaire:

Day

Month

Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

MR [REDACTED] has a pilot's

license.

FTD (TDETR)  
Wright-Patterson AFB, Ohio 45433  
23 August 1966

[REDACTED]  
Dayton, Ohio 45416

Dear Mr. [REDACTED]

Reference your unidentified observation of 3 August 1966. The information which we have received is not sufficient for evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided.

We wish to thank you for reporting your observation to the Air Force.

Sincerely,

HECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Project Blue Book

OFFICIAL FILE COPY

TDETR  
Office of Record



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?

3 Day Aug. Month 1966 Year

2. Time of day: 7 Hour 30 Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern b. Central c. Mountain d. Pacific e. Other

(Circle One): a. Daylight Saving Standard b.

4. Where were you when you saw the object?

[Redacted] Dayton Ohio MONT. Nearest Postal Address City or Town State or County

5. How long was object in sight? (Total Duration)

10 or 15 Hours Minutes Seconds

a. 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 X No

6. What was the condition of the sky?

DAY NIGHT a. Bright b. Cloudy a. Bright b. Cloudy

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One): a. In front of you b. In back of you c. To your right d. To your left e. Overhead f. Don't remember

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 *very*
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

\_\_\_\_\_

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13. Did the object:

(Circle One for each question)

- a. Appear to stand still at any time?
- b. Suddenly speed up and rush away at any time?
- c. Break up into parts or explode?
- d. Give off smoke?
- e. Change brightness?
- f. Change shape?
- g. Flash or flicker?
- h. Disappear and reappear?

- |                                      |                                     |            |
|--------------------------------------|-------------------------------------|------------|
| <input checked="" type="radio"/> Yes | No                                  | Don't know |
| <input checked="" type="radio"/> Yes | No                                  | Don't know |
| Yes                                  | <input checked="" type="radio"/> No | Don't know |
| Yes                                  | <input checked="" type="radio"/> No | Don't know |
| Yes                                  | <input checked="" type="radio"/> No | Don't know |
| Yes                                  | <input checked="" type="radio"/> No | Don't know |
| Yes                                  | <input checked="" type="radio"/> No | Don't know |

*BUT NOT SEEN B/M*

14. Did the object disappear while you were watching it? If so, how? NO I was IN The  
House Calling The Field at The Time IT moved out

15. Did the object move behind something at any time, particularly a cloud?

(Circle One): Yes  No  Don't Know. IF you answered YES, then tell what  
 it moved behind: \_\_\_\_\_

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One): Yes  No  Don't Know. IF you answered YES, then tell what  
 in front of: \_\_\_\_\_

17. Tell in a few words the following things about the object:

- a. Sound NO  
 b. Color VERY BRIGHT Silver color

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?

The object was approx. 3/16 in diameter

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

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

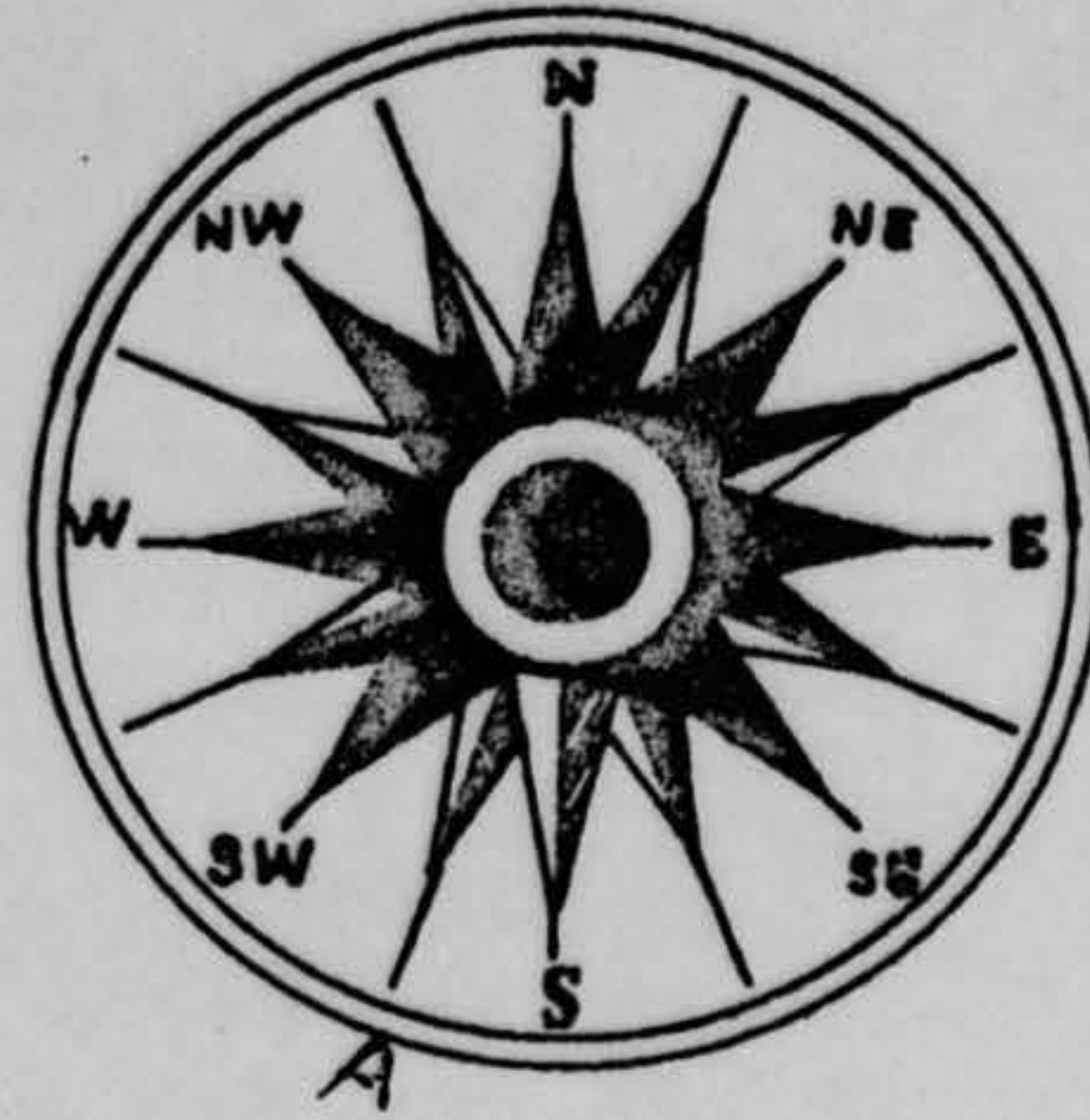
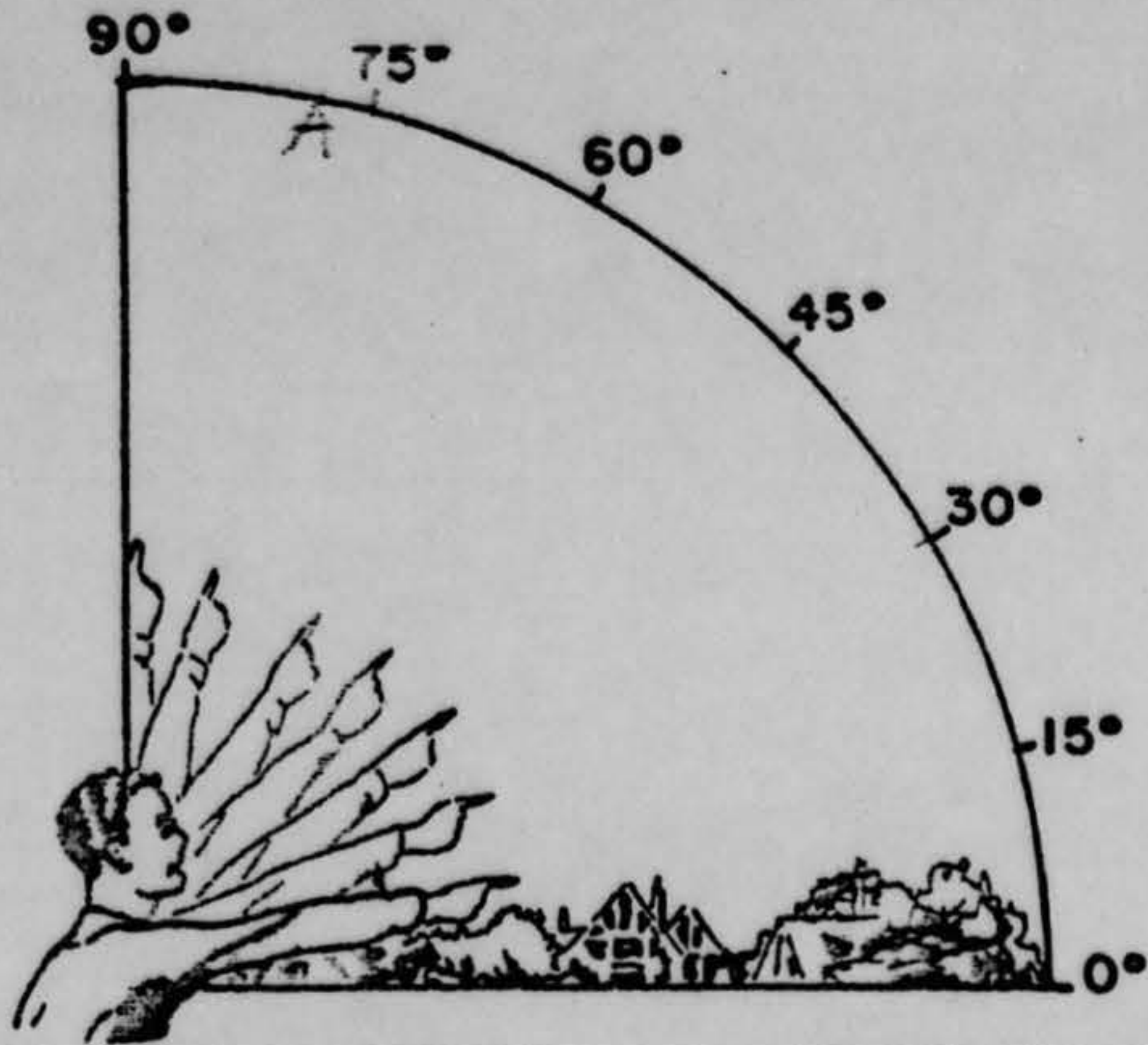
No

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.

*Like an aircraft at Vaper Track ALTITUDE with sun reflecting OFF bottom side. Only perfect circle and BRIGHTER*

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:

[Redacted] Fairsmith ST.  
[Redacted] Fairsmith ST.

32. Please give the following information about yourself:

NAME [Redacted] [Redacted] [Redacted]  
Last Name First Name Middle Name  
ADDR [Redacted] [Redacted] [Redacted] Ohio  
Street City Zone State  
TELEPHONE NUMBER [Redacted] AGE 33 SEX Male

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?

3 Aug. 1966  
Day Month Year

34. Date you completed this questionnaire:

10

Day

Aug.

Month

1966

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.

**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?

3 Day    Aug. Month    1966 Year

2. Time of day: 7 Hour    30 Minutes

(Circle One): A.M. or (P.M.)

3. Time Zone:

(Circle One):  a. Eastern  
 b. Central  
 c. Mountain  
 d. Pacific  
 e. Other \_\_\_\_\_

(Circle One):  a. Daylight Saving  
 Standard

4. Where were you when you saw the object?

[REDACTED] Nearest Postal Address    DAYTON City or Town    OHIO - MONT. State or County

5. How long was object in sight? (Total Duration)

\_\_\_\_\_ Hours    10 Minutes    \_\_\_\_\_ Seconds

a. Certain    c. Not very sure  
b. Fairly certain     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    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    d. To your left  
b. In back of you    e. Overhead  
 To your right    f. Don't remember



8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

\_\_\_\_\_

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

c. Other \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13. Did the object:

(Circle One for each question)

- |   |     |                                       |            |
|---|-----|---------------------------------------|------------|
| a. Appear to stand still at any time?           | Yes | <input checked="" type="radio"/> No   | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes | <input checked="" type="radio"/> No   | Don't know |
| c. Break up into parts or explode?              | Yes | <input checked="" type="radio"/> No   | Don't know |
| d. Give off smoke?                              | Yes | <input checked="" type="radio"/> No   | Don't know |
| e. Change brightness?                           | Yes | <input checked="" type="radio"/> No   | Don't know |
| f. Change shape?                                | Yes | <input checked="" type="radio"/> No   | Don't know |
| g. Flash or flicker?                            | Yes | <input checked="" type="radio"/> No   | Don't know |
| h. Disappear and reappear?                      | Yes | <input checked="" type="radio"/> No ? | Don't know |

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

\_\_\_\_\_

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13. Did the object:

(Circle One for each question)

- |   |                                      |    |            |
|---|--------------------------------------|----|------------|
| a. Appear to stand still at any time?           | <input checked="" type="radio"/> Yes | No | Don't know |
| b. Suddenly speed up and rush away at any time? | <input checked="" type="radio"/> Yes | No | Don't know |
| c. Break up into parts or explode?              | <input type="radio"/> Yes            | No | Don't know |
| d. Give off smoke?                              | <input type="radio"/> Yes            | No | Don't know |
| e. Change brightness?                           | <input type="radio"/> Yes            | No | Don't know |
| f. Change shape?                                | <input type="radio"/> Yes            | No | Don't know |
| g. Flash or flicker?                            | <input checked="" type="radio"/> Yes | No | Don't know |
| h. Disappear and reappear?                      | <input type="radio"/> Yes            | No | Don't know |

14. Did the object disappear while you were watching it? If so, how?

Lights came on part of object, then moved South East and up out of sight.

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

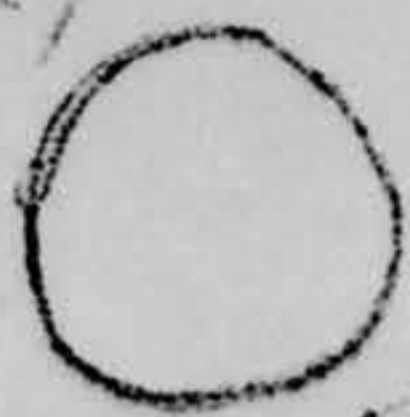
b. Color Silver in color


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?

I believe the match head would have covered the object.

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.

Very clean  
  
 No protrusions

Lights came on  
  
 moved out  
 SOUTH EAST  
 Lights in front  
 Behind  
 No vapor trail

20. Do you think you can estimate the speed of the object?

(Circle One)

Yes

No

Very Rapid

IF you answered YES, then what speed would you estimate? \_\_\_\_\_

21. Do you think you can estimate how far away from you the object was?

(Circle One)

Yes

No

IF you answered YES, then how far away would you say it was? \_\_\_\_\_

22. Where were you located when you saw the object?

(Circle One):

a. Inside a building

b. In a car

c. Outdoors

d. In an airplane (type) \_\_\_\_\_

e. At sea

f. Other \_\_\_\_\_

23. Were you (Circle One)

a. In the business section of a city?

b. In the residential section of a city?

c. In open countryside?

d. Near an airfield?

e. Flying over a city?

f. Flying over open country?

g. Other \_\_\_\_\_

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

a. North

c. East

e. South

g. West

b. Northeast

d. Southeast

f. Southwest

h. Northwest

24.2 How fast were you moving? \_\_\_\_\_ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)

Yes

No

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

a. Eyeglasses

Yes

No

e. Binoculars

Yes

No

b. Sun glasses

Yes

No

f. Telescope

Yes

No

c. Windshield

Yes

No

g. Theodolite

Yes

No

d. Window glass

Yes

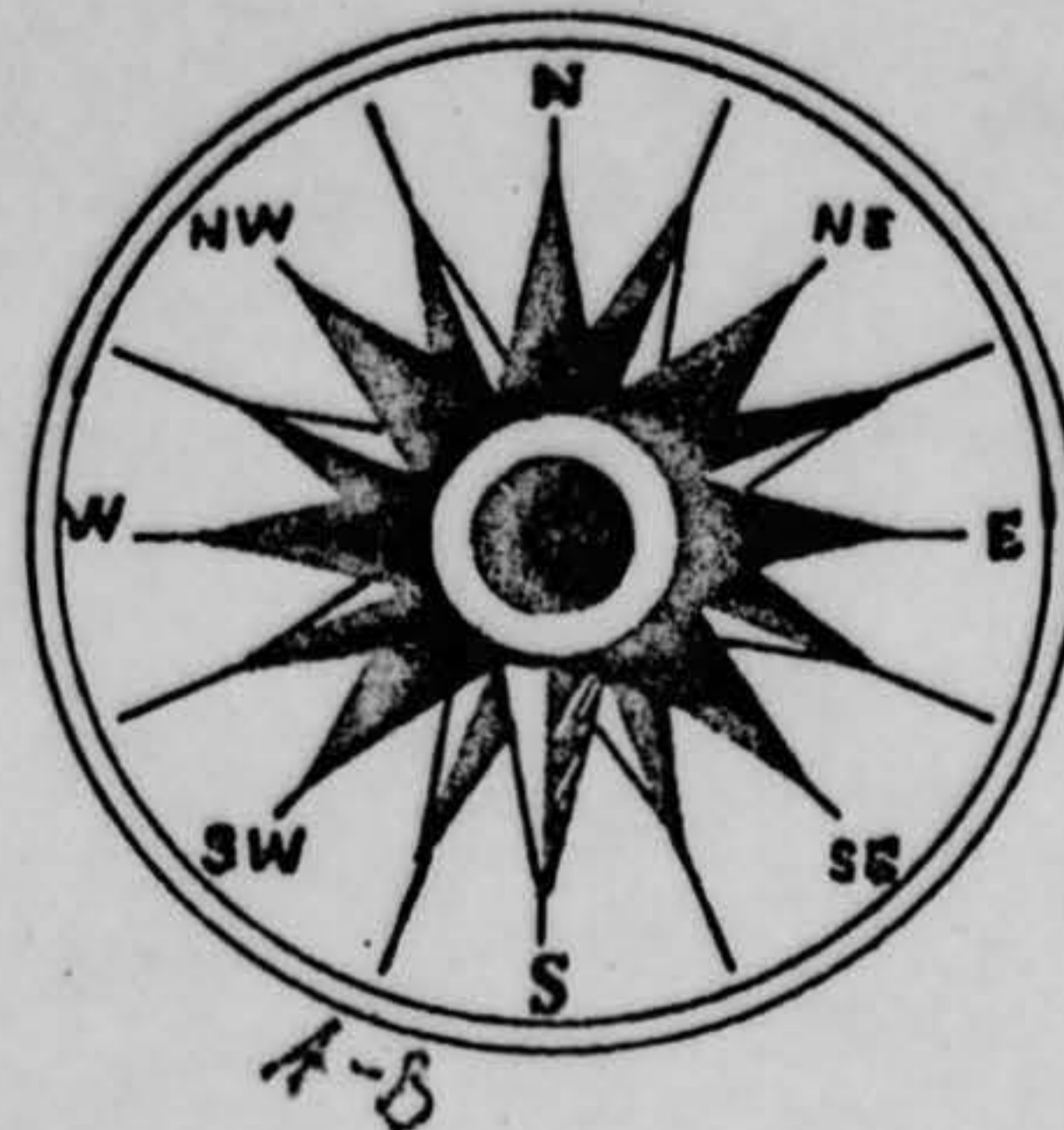
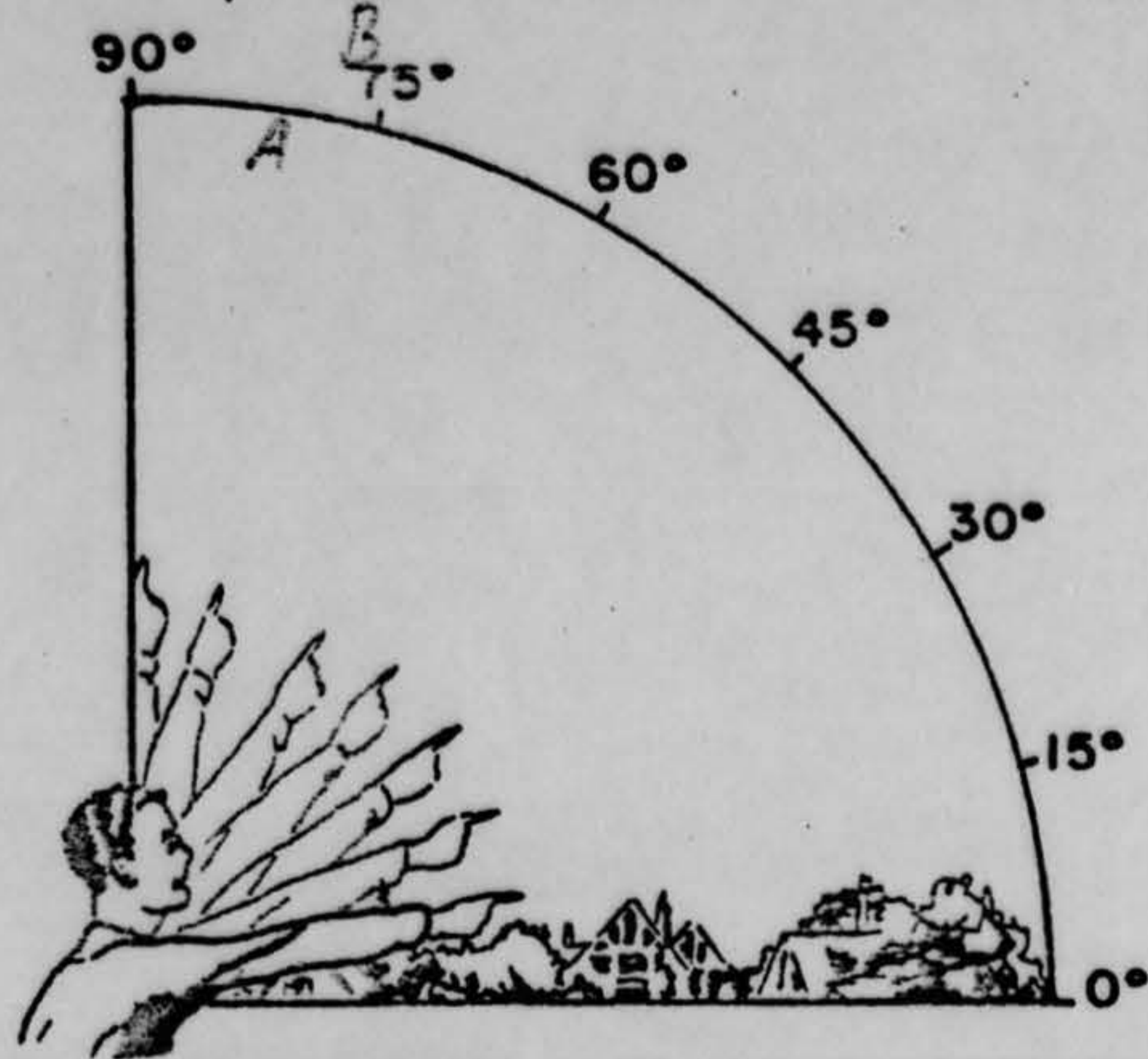
No

h. Other \_\_\_\_\_

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

wrench plug  
Such AS used in Auto Engines + Carburetors

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.

When the object moved it moved straight out and up  
 No motion such as spinning or yawing  
 And it moved only about six (6) inches until out  
 of sight.

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. Nothing Like This

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] FAIRSMITH  
[Redacted] "

32. Please give the following information about yourself:

NAME [Redacted] [Redacted] [Redacted]  
Last Name First Name Middle Name  
ADDRESS [Redacted] DAYTON 16 OHIO  
Street City Zone State  
TELEPHONE NUMBER [Redacted] AGE 40 SEX Male

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

Private Pilot.

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

10 Aug 66  
Day Month Year

34. Date you completed this questionnaire:

10      Aug      66  
Day      Month      Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

I NEVER SAW ANYTHING LIKE THIS BEFORE  
I KNOW THIS WAS NOT SWAMP GAS!

OK, OK, OK!

JH

**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.

<p>1. When did you see the object?</p> <p align="center"> <u>3</u>      <u>8</u>      <u>1966</u>                  Day      Month      Year             </p>	<p>2. Time of day: <u>7</u>      <u>30</u>                  Hour      Minutes</p> <p>(Circle One):      A.M.      or      <u>P.M.</u></p>
<p>3. Time Zone: (Circle One): a. <u>Eastern</u>                  b. Central                  c. Mountain                  d. Pacific                  e. Other _____</p> <p>(Circle One): a. Daylight Saving                  b. <u>Standard</u></p>	
<p>4. Where were you when you saw the object?</p> <p> <span style="background-color: black; color: black;">[REDACTED ADDRESS]</span>      <u>Dublin</u>      <u>Ohio</u>                  Nearest Postal Address      City or Town      State or County             </p>	
<p>5. How long was object in sight? (Total Duration)      <u>10-15</u>                  Hours      Minutes      Seconds</p> <p>a. <u>Certain</u>      c. Not very sure                  b. <u>Fairly certain</u>      d. Just a guess</p> <p>5.1 How was time in sight determined? <u>By WRIST WATCH</u></p> <p>5.2 Was object in sight continuously?      Yes <u>X</u>      No _____</p>	
<p>6. What was the condition of the sky?</p> <p>                 DAY <input checked="" type="checkbox"/>      NIGHT                  a. <u>Bright</u>      a. Bright                  b. Cloudy      b. Cloudy             </p>	
<p>7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?</p> <p>(Circle One): a. In front of you      d. To your left                  b. In back of you      e. Overhead                  c. <u>To your right</u>      f. Don't remember</p> <p align="center"><u>Slightly towards my back</u></p>	



8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

\_\_\_\_\_

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13. Did the object:

(Circle One for each question)

- |   |            |           |            |
|---|------------|-----------|------------|
| a. Appear to stand still at any time?           | <u>Yes</u> | No        | Don't know |
| b. Suddenly speed up and rush away at any time? | <u>Yes</u> | No        | Don't know |
| c. Break up into parts or explode?              | Yes        | <u>No</u> | Don't know |
| d. Give off smoke?                              | Yes        | <u>No</u> | Don't know |
| e. Change brightness?                           | Yes        | <u>No</u> | Don't know |
| f. Change shape?                                | Yes        | <u>No</u> | Don't know |
| g. Flash or flicker?                            | Yes        | <u>No</u> | Don't know |
| h. Disappear and reappear?                      | <u>Yes</u> | No        | Don't know |

14. Did the object disappear while you were watching it? If so, how?

DISAPPEARED FOR A FEW SECONDS &  
REAPPEARED FARTHER OUT ON SAME PATH.

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 & SILVERISH 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?

NEAR THE SIZE OF 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     | 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 <input type="radio"/> | No <input checked="" type="radio"/> | e. Binoculars  | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| b. Sun glasses  | Yes <input type="radio"/> | No <input checked="" type="radio"/> | f. Telescope   | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| c. Windshield   | Yes <input type="radio"/> | No <input checked="" type="radio"/> | g. Theodolite  | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| d. Window glass | Yes <input type="radio"/> | No <input checked="" type="radio"/> | 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.

PERFECTLY CIRCULAR COLORED  
HUB CAP

14. Did the object disappear while you were watching it? If so, how?

*it disappeared behind the trees in yard  
but we just moved over a few feet till we  
had it in view again.*

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: *tree*

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:

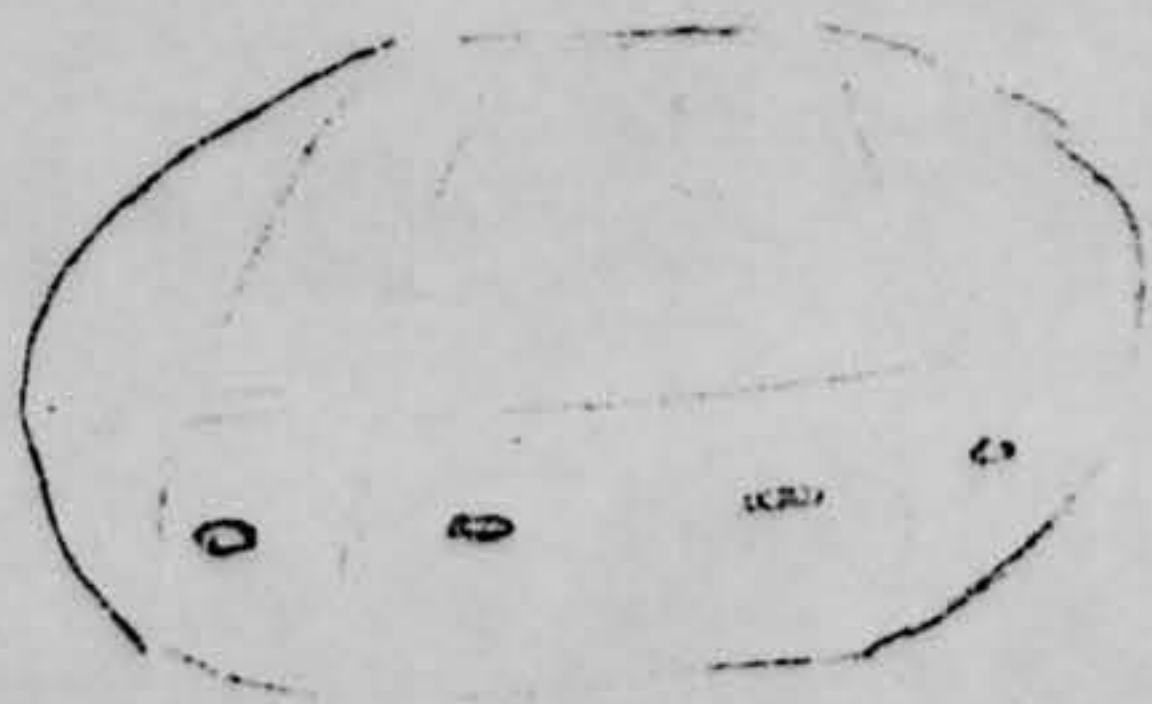
- a. Sound *no sound*  
b. Color *white - black markings or spots on lower half.*

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?

*The water tower at which the last sighting  
was made was completely covered by match  
stick. If I had performed this experiment  
at time, the object would have been completely covered.*

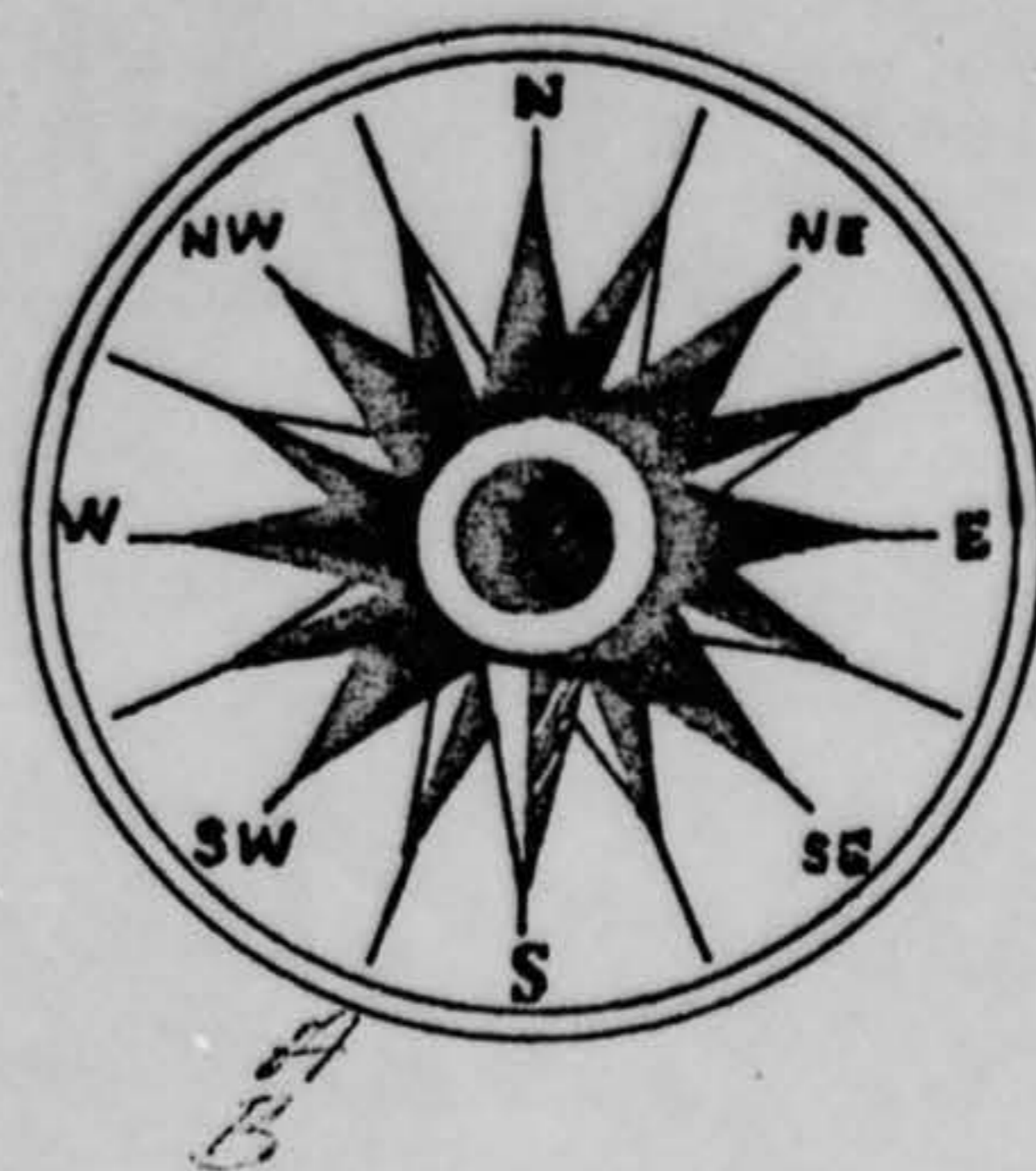
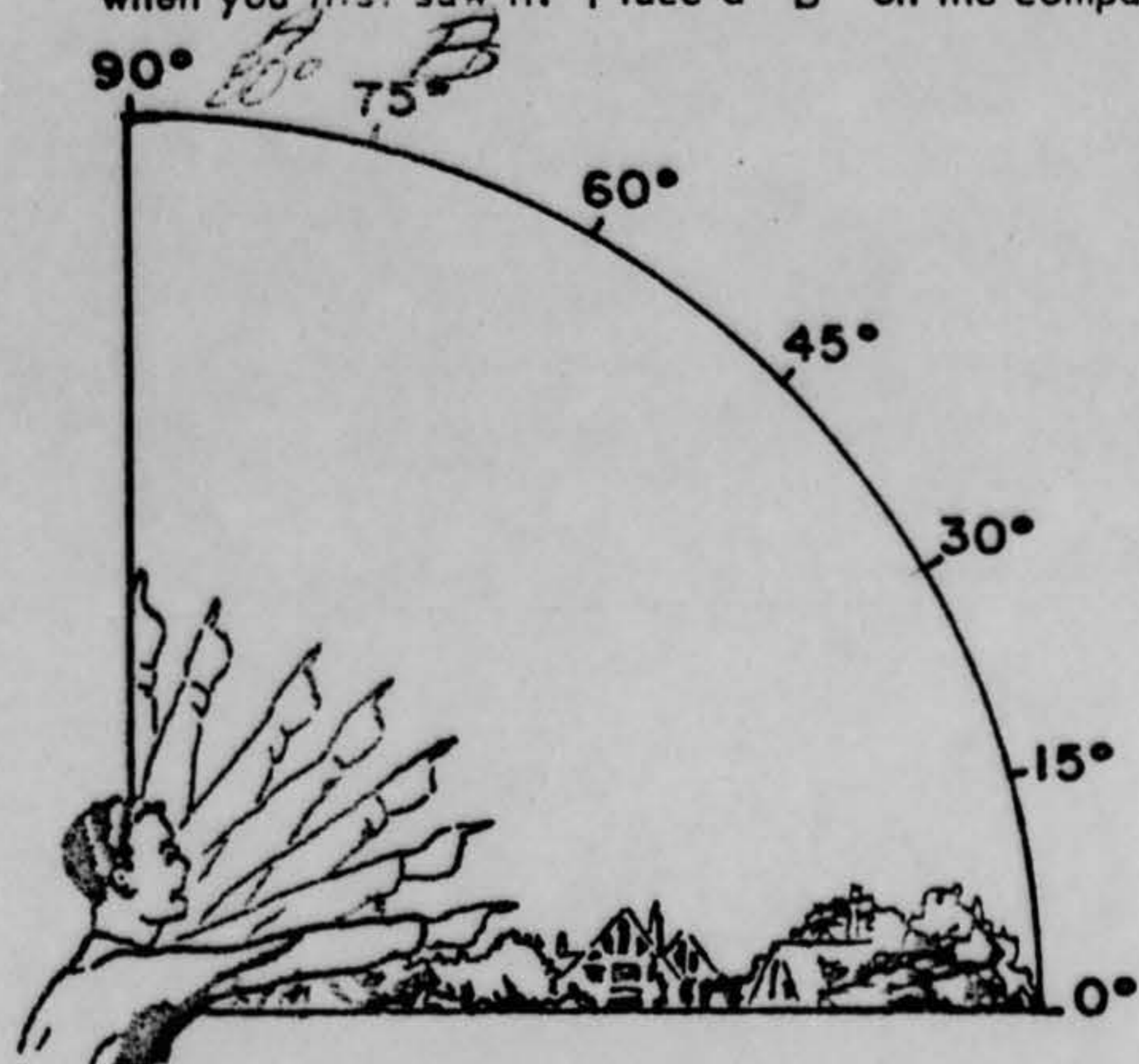
19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails.

Place an arrow beside the drawing to show the direction the object was moving.



*There appeared to be  
no vapor or exhaust trails.  
There were no objects  
hanging from it.*

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.

*OBJECT DISAPPEARED & REAPPEARED ONCE.*



29. IF there was MORE THAN ONE object, then how many were there? \_\_\_\_\_

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

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

No.

31. Was anyone else with you at the time you saw the object? (Circle One) Yes No

31.1 IF you answered YES, did they see the object too? (Circle One) Yes No

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

NAME [Redacted] [Redacted] [Redacted]  
Last Name First Name Middle Name

ADDRESS [Redacted] DAYTON 45416 OHIO  
City Zone State

TELEPHONE [Redacted] 210 SEX MALE

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

DEFINITELY NOT A HALUCINATION.

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

\_\_\_\_\_  
Day Month Year

34. Date you completed this questionnaire:

April 1966  
 Day Month Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

THE OBJECT WAS DEFINITELY ROUND &  
SHARP EDGED.

THE OBJECT REMAINED STATIONARY  
FOR 10-15 MINUTES.

THE THEN ACCELERATED AT VERY HIGH  
RATE OF SPEED, DISAPPEARED & REAPPEARED  
ONE TIME.

IT MOVED ABOUT 5° TOWARD HORIZON.

IT WASN'T LIKE A BALLON (WEATHER), PLANE  
OR ANY GASEOUS TYPE MATERIAL.

IT WAS SAUCER SHAPED.

SINCERELY YOURS

20 Sept. 66

Contact with Sulphur Grove balloon launch center, Dayton, Ohio about balloons being released on 3 August 66. There was a balloon released at 1815 3 August 66, however, personnel at Sulphur Grove did not believe their balloon was responsible for the sighting. Their balloons are in the air for about 1 hour. A balloon launched at 1815 would have been not in the Dayton area unless under very unusual conditions.



PROJECT 10073 RECORD

<b>1. DATE - TIME GROUP</b> 3 August 66 04/0200Z	<b>2. LOCATION</b> Dayton, Ohio
<b>3. SOURCE</b> Civilian	<b>10. CONCLUSION</b> INSUFFICIENT DATA FOR EVALUATION ✓ JH
<b>4. NUMBER OF OBJECTS</b> N/A	
<b>5. LENGTH OF OBSERVATION</b> 1 Minute	<b>11. BRIEF SUMMARY AND ANALYSIS</b> Form 164 was sent to observer and returned due to "ADDRESS UNKNOWN".
<b>6. TYPE OF OBSERVATION</b> Ground-Visual	
<b>7. COURSE</b> N/A	
<b>8. PHOTOS</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>9. PHYSICAL EVIDENCE</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Dayton, Ohio

3 Aug 66

FTD (TDETR)  
Wright-Patterson AFB, Ohio 45433  
8 August 1966

[Redacted]  
New York, N. Y. 10014

Dear Mr. [Redacted]

Reference your unidentified observation of 3 August 1966. The information which we have received is not sufficient for evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided.

We wish to thank you for reporting your observation to the Air Force.

Sincerely,

HECTOR QUINTANILLA, JR, Major, USAF  
Chief, Project Blue Book

COORDINATION  
ORIGINATOR: \_\_\_\_\_ DATED \_\_\_\_\_  
TDETR MAJ H QUINTANILLA, JR  
\_\_\_\_\_  
TDET \_\_\_\_\_ DATED \_\_\_\_\_

OFFICIAL FILE COPY

Office of Record

REC'D BY  
GLASS

### 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?

3 AUG 1966  
Day Month Year

2. Time of day: 2100  
Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern  
b. Central  
c. Mountain  
d. Pacific  
e. Other \_\_\_\_\_

(Circle One): a. Daylight Saving  
b. Standard

4. Where were you when you saw the object?

BANDSHELL ISLAND PARK  
Nearest Postal Address

DARTON  
City or Town

OHIO  
State or County

5. How long was object in sight? (Total Duration)

\_\_\_\_\_ 60  
Hours Minutes Seconds

a. 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  
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

Serial 164

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 AS BRIGHTEST
- d. Don't know

11.1 Compare brightness to some common object:

OCULUS

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 | <input checked="" type="radio"/> No | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes | <input checked="" type="radio"/> No | Don't know |
| c. Break up into parts or explode?              | Yes | <input checked="" type="radio"/> No | Don't know |
| d. Give off smoke?                              | Yes | <input checked="" type="radio"/> No | Don't know |
| e. Change brightness?                           | Yes | <input checked="" type="radio"/> No | Don't know |
| f. Change shape?                                | Yes | <input checked="" type="radio"/> No | Don't know |
| g. Flash or flicker?                            | Yes | <input checked="" type="radio"/> No | Don't know |
| h. Disappear and reappear?                      | Yes | <input checked="" type="radio"/> 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 \_\_\_\_\_

b. Color \_\_\_\_\_

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     | 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 | <input checked="" type="radio"/> 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.

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? *suburbs*  
 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

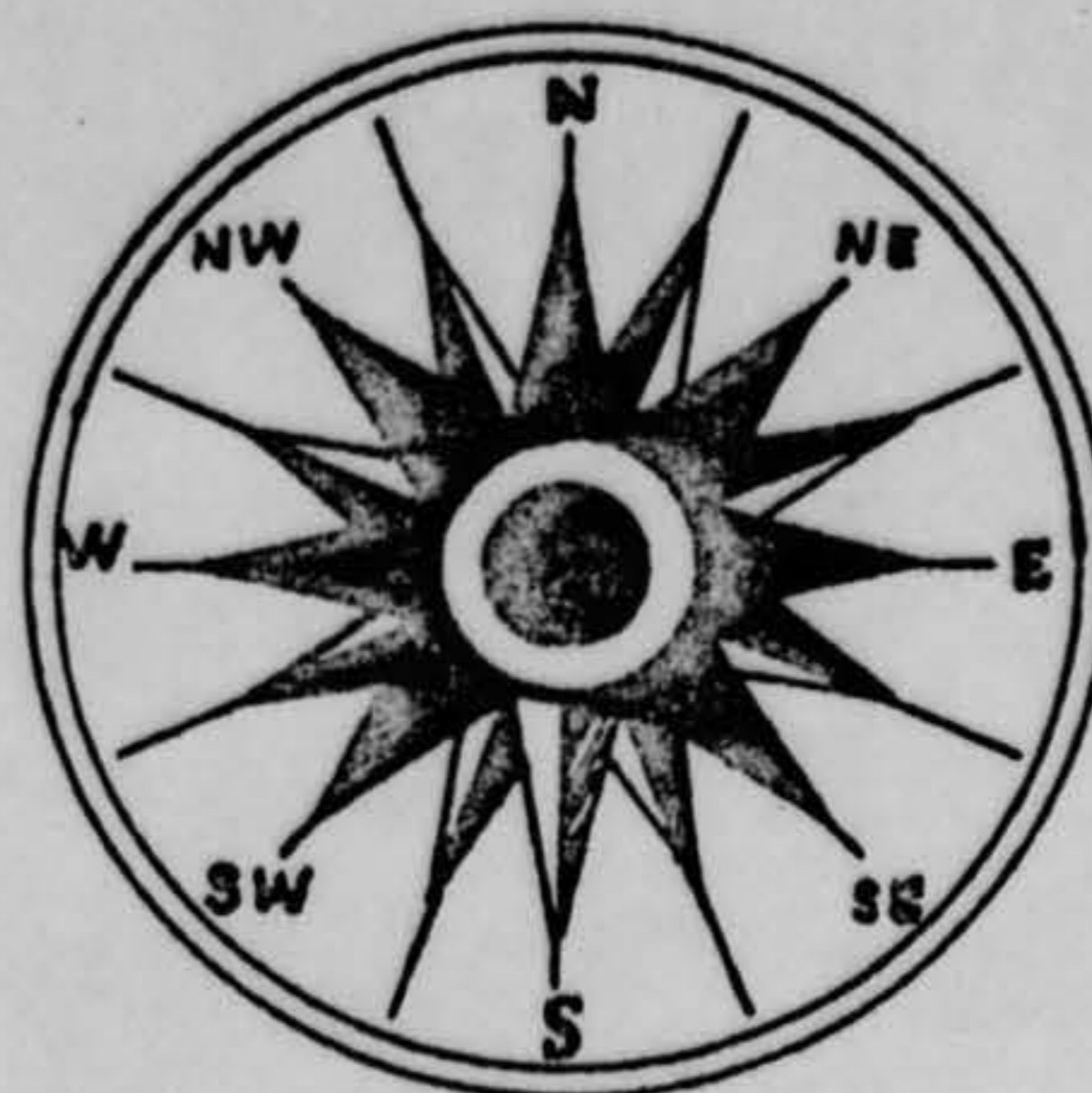
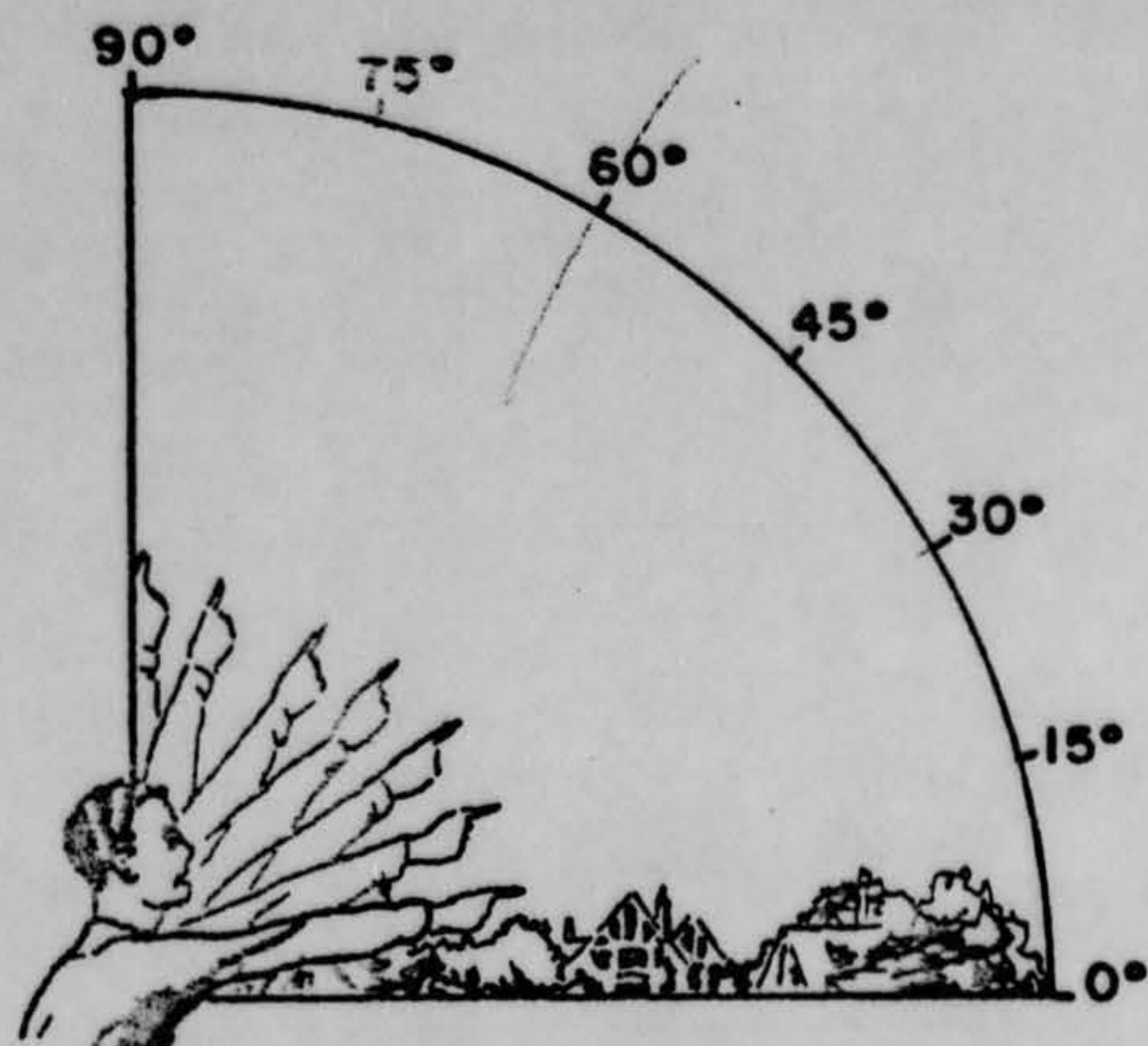
25. Did you observe the object through any of the following?

- |                 |     |    |               |                                      |    |
|-----------------|-----|----|---------------|--------------------------------------|----|
| a. Eyeglasses   | Yes | No | e. Binoculars | <input checked="" type="radio"/> 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.

*at first it appeared to be a parachute at quite a high distance, but with the naked eye no strings attached. Through binoculars it reminded me of two open parachutes (one upside down) fastened together, with black spots on lower half.*

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.

yes Satellite

31. Was anyone else with you at the time you saw the object? (Circle One)  Yes  No

31.1 IF you answered YES, did they see the object too? (Circle One)  Yes  No

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

NAME [Redacted] [Redacted] [Redacted]  
Last Name First Name Middle Name

ADDRESS [Redacted] NYC    
Street City Zone State

TELEPHONE NUMBER [Redacted] AGE 29 SEX M 100  
14

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

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

Day Month Year



FTD (TD-**ETR**) )  
WRIGHT-PATTERSON AFB, OHIO 45433

REASON CHECKED

POSTAGE AND FEES PAID

Unknown

UNITED STATES AIR FORCE  
OFFICIAL BUSINESS

**FIRST CLASS**

New York, N. Y. 10014

Address unknown  
115739

FTD FORM JUL 61 383

This form supersedes ATIC Form Nr. 383, dated Dec 60, which is obsolete.

PROJECT 1073 RECORD

1. DATE - TIME GROUP 3 August 66 01/0345Z	2. LOCATION Dayton, Ohio
3. SOURCE Civilian	10. CONCLUSION INSUFFICIENT DATA FOR EVALUATION
4. NUMBER OF OBJECTS One	
5. LENGTH OF OBSERVATION 5 Minutes	11. BRIEF SUMMARY AND ANALYSIS  SEE CASE
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE Not Reported	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Dayton, Ohio 3 Aug 66

FTD (TDETR)/HL / 8 Aug 66  
Wright-Patterson AFB, Ohio 45433  
8 August 1966

[REDACTED]  
Dayton, Ohio 45424

To whom it may concern,

We are in receipt of the Duty Officer's report for 3 August 1966. His report indicates that an observer, at the above address, witnessed an unidentified object on 3 August 1966. The information which we have received is not sufficient for evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided.

We wish to thank you for reporting your observation to the Air Force.

Sincerely,

#  
DIRECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Project Blue Book

TDETR OFFICIAL FILE COPY

Office of Record

**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.

<p>1. When did you see the object?</p> <p align="center"> <u>3</u>      <u>Aug</u>      <u>66</u>              Day      Month      Year         </p>	<p>2. Time of day: <u>22</u>      <u>45</u>              Hour      Minutes</p> <p>(Circle One):      A.M.      or      <u>P.M.</u></p>
<p>3. Time Zone:</p> <p>(Circle One): a. <u>Eastern</u>              b. Central              c. Mountain              d. Pacific              e. Other _____</p> <p>(Circle One): a. Daylight Saving              b. Standard</p>	
<p>4. Where were you when you saw the object?</p> <p><del>_____</del>      <u>Huber Heights</u>              Nearest Postal Address      City or Town      State or County</p>	
<p>5. How long was object in sight? (Total Duration)      _____ <u>5</u> _____              Hours      Minutes      Seconds</p> <p>a. Certain      c. Not very sure              b. <u>Fairly certain</u>      d. Just a guess</p> <p>5.1 How was time in sight determined? <u>estimated</u></p> <p>5.2 Was object in sight continuously?      Yes <input checked="" type="checkbox"/>      No _____</p>	
<p>6. What was the condition of the sky?</p> <p>DAY      NIGHT</p> <p>a. Bright      <u>a. Bright</u>              b. Cloudy      b. Cloudy</p>	
<p>7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?</p> <p>(Circle One): a. In front of you      d. To your left              b. In back of you      e. Overhead              c. To your right      f. Don't remember</p>	

*Serial 164*

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

*couldn't say  
changes color*

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

\_\_\_\_\_

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other can't tell

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

13. Did the object:

(Circle One for each question)

- |   |            |           |            |
|---|------------|-----------|------------|
| a. Appear to stand still at any time?           | <u>Yes</u> | No        | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes        | <u>No</u> | Don't know |
| c. Break up into parts or explode?              | Yes        | <u>No</u> | Don't know |
| d. Give off smoke?                              | Yes        | <u>No</u> | Don't know |
| e. Change brightness?                           | Yes        | <u>No</u> | Don't know |
| f. Change shape?                                | Yes        | <u>No</u> | Don't know |
| g. Flash or flicker?                            | <u>Yes</u> | No        | Don't know |
| h. Disappear and reappear?                      | Yes        | <u>No</u> | 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 None

b. Color bright starry color going to light blue

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?

appeared about size of ordinary star

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.

no particular shape

20. Do you think you can estimate the speed of the object?

(Circle One) Yes No

N/A

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

A great 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

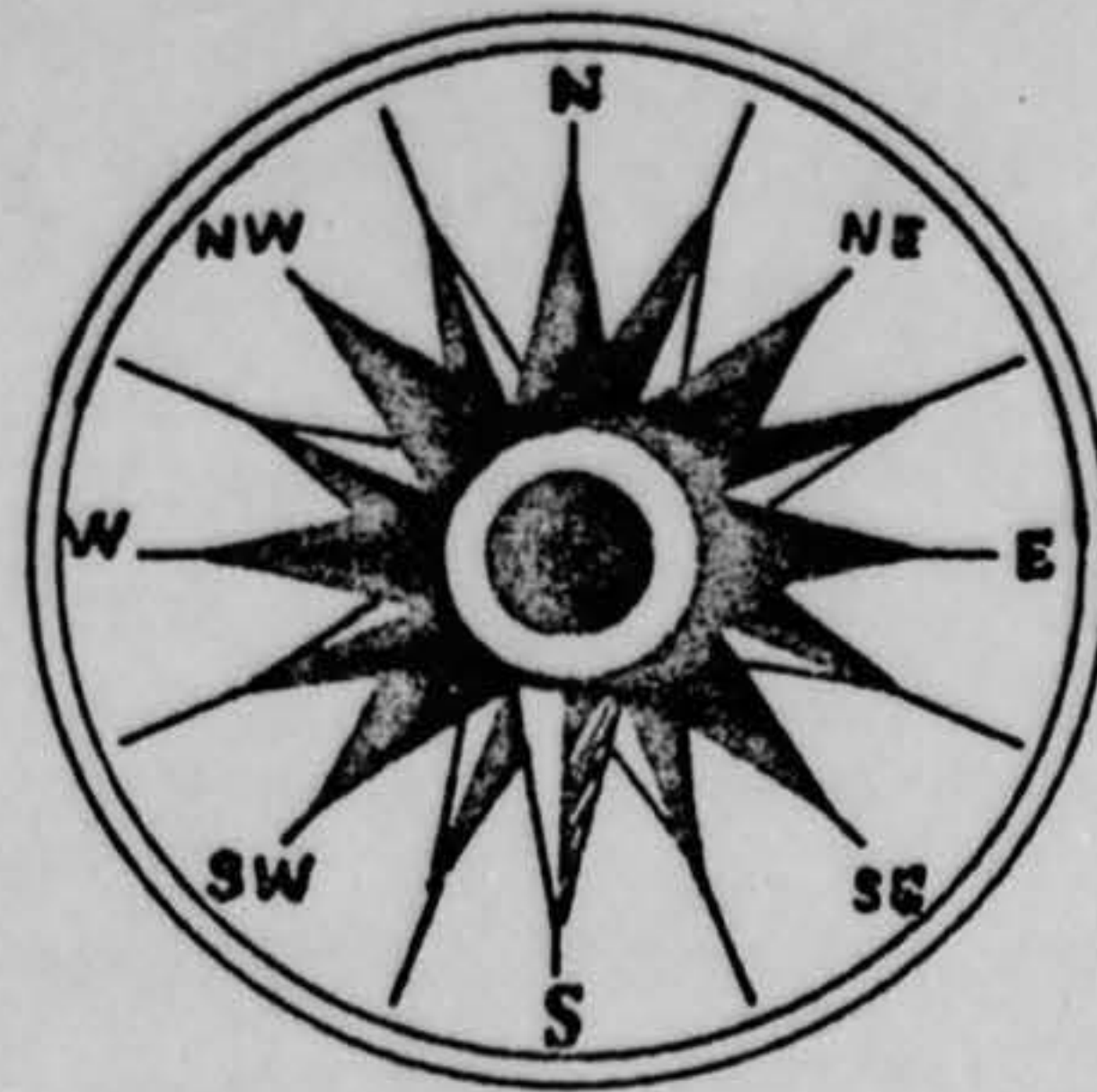
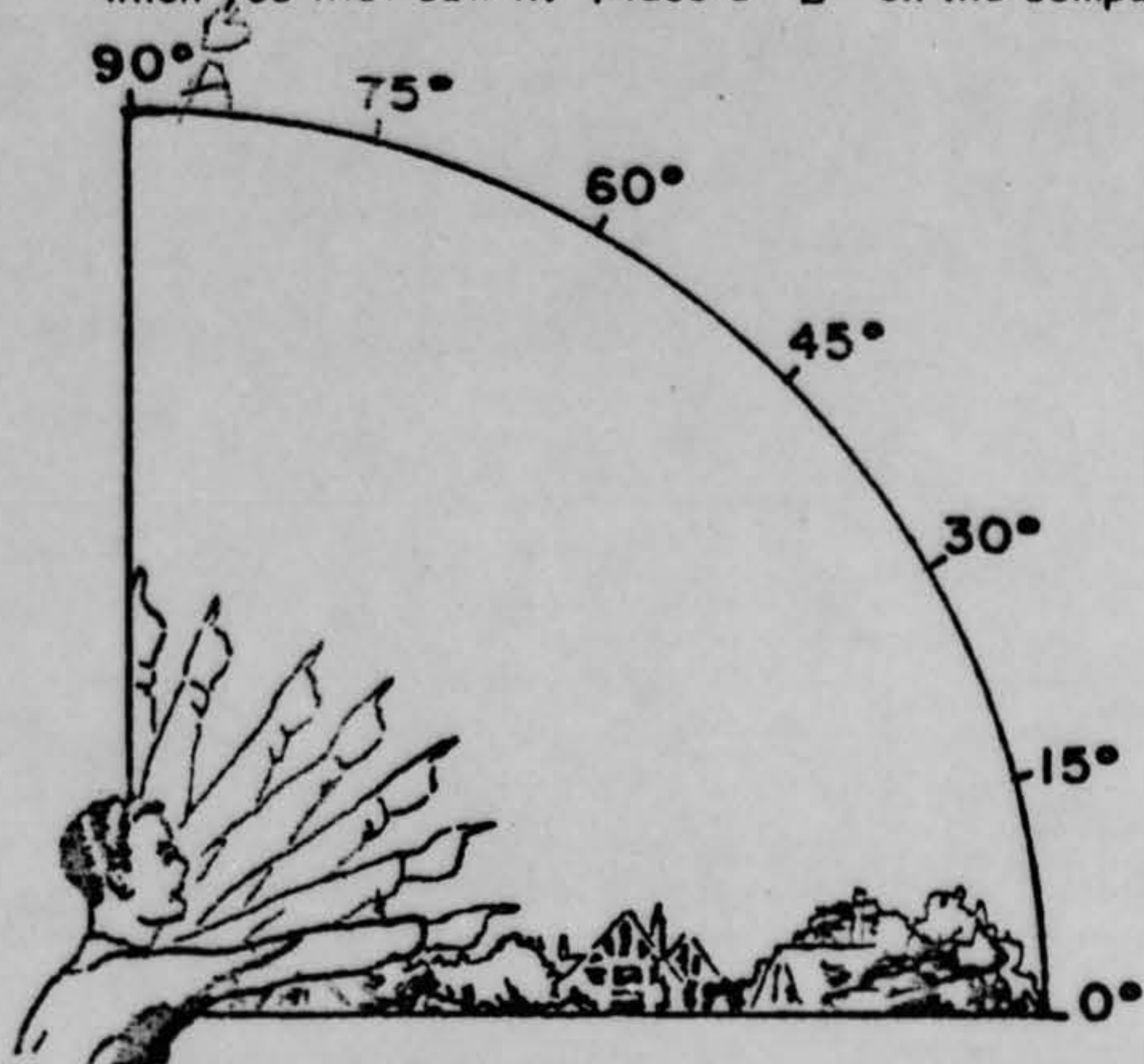
h. Other \_\_\_\_\_

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.

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.

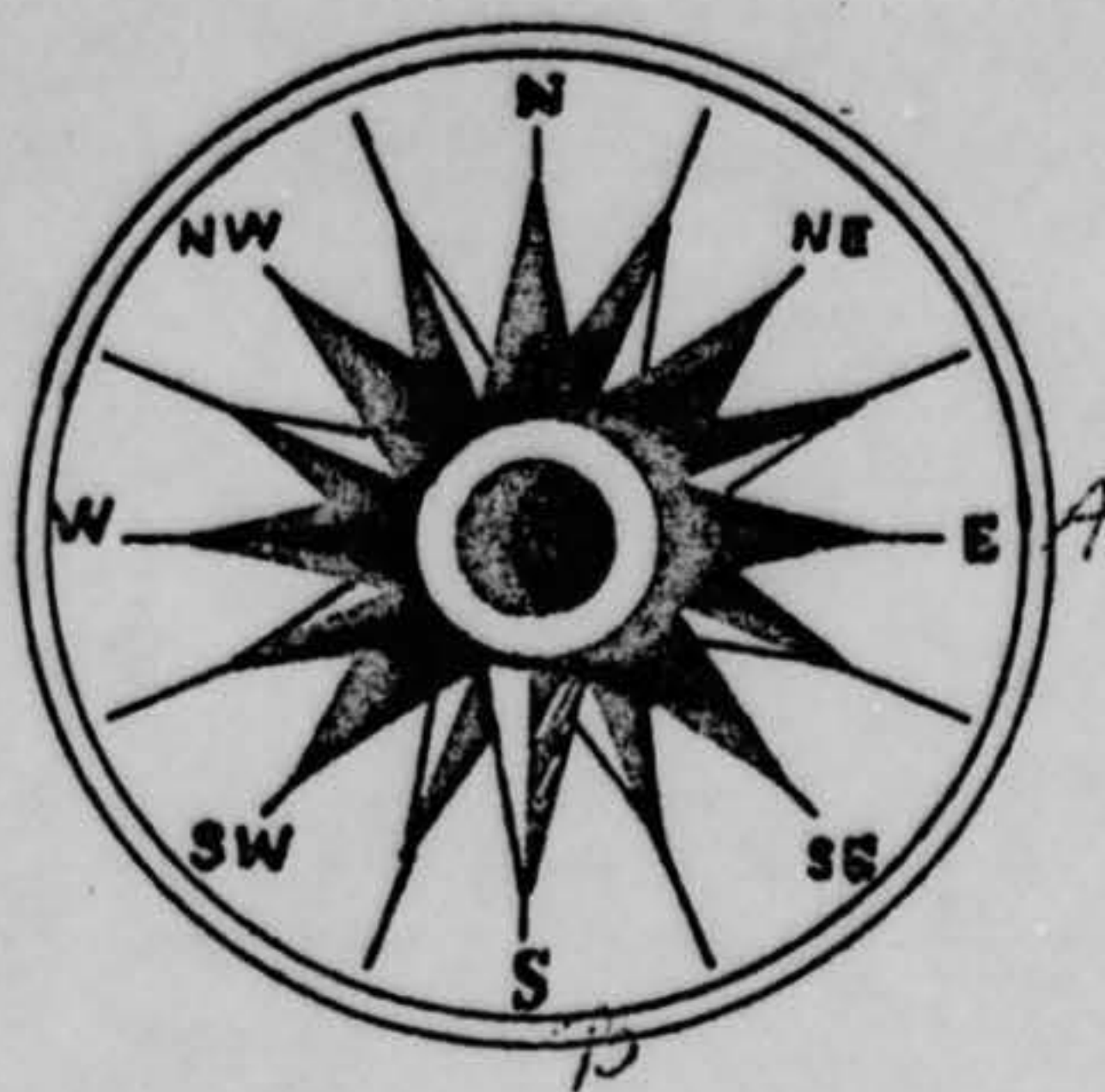
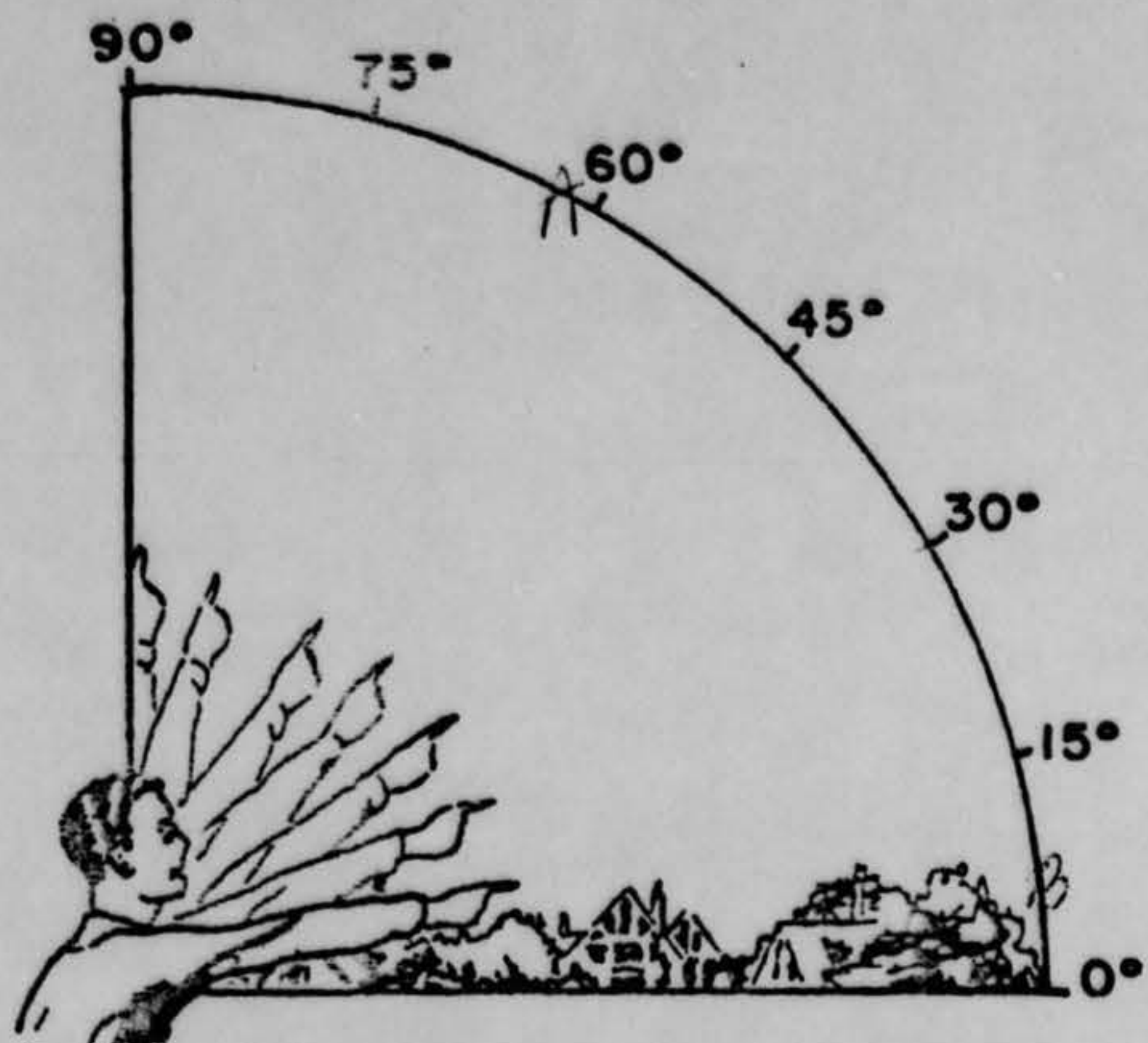


28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

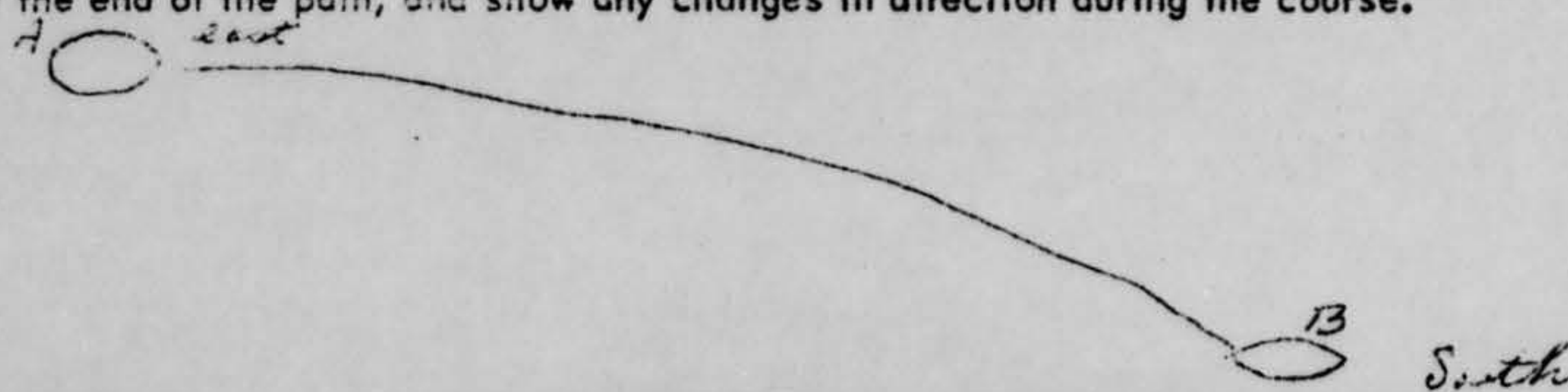
29. IF there was MORE THAN ONE object, then how many were there? \_\_\_\_\_  
 Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

N / A

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.

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:

*her son  
same address*

32. Please give the following information about yourself:

NAME \_\_\_\_\_

Last Name

First Name

Middle Name

ADDRESS \_\_\_\_\_

Street

City

Zone

State

TELEPHONE NUMBER \_\_\_\_\_ AGE \_\_\_\_\_ SEX  F

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

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

3 Aug 66  
Day Month Year

*F 7 D duty of Police*

## PROJECT 10073 RECORD

1. DATE - TIME GROUP 3 & 4 Aug 66 afternoon	2. LOCATION Dayton, Ohio 2 witnesses
3. SOURCE Civilian	10. CONCLUSION Insufficient data for evaluation <i>Sept</i>
4. NUMBER OF OBJECTS two	
5. LENGTH OF OBSERVATION Varied	11. BRIEF SUMMARY AND ANALYSIS Observers have seen several things on two different days. The submitted information is lacking in essential data to make an evaluation.
6. TYPE OF OBSERVATION Ground Visual	
7. COURSE Varied	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

3-4 170766

DAYTON, O.

10 Bolton St  
Dayton 3 Ohio

Dear Sir

I seen that thing that exploded in the sky and the new thing that has been sent up for pictures and something else near it. But since the paper says the field knows whats up there I still look but I dont get so excited anymore because I hate to think Im so foolish to know that you wouldnt know what is up there but I still look cause its amazing the things that is there.

[Redacted]

[Redacted] ST  
DAYTON 3 Ohio

[Redacted]

**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?

3 — 8 — 66  
4 — 8 — 66  
 Day Month Year

2. Time of day: 11 05  
 Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern —  
 b. Central  
 c. Mountain  
 d. Pacific  
 e. Other \_\_\_\_\_

(Circle One): a. Daylight Saving —  
 b. Standard

4. Where were you when you saw the object?

~~\_\_\_\_\_~~  
 Nearest Postal Address

Dayton 3  
 City or Town

Ohio  
 State or County

5. How long was object in sight? (Total Duration)

12:30 PM all the time on  
 Hours Minutes Seconds

a. 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 NIGHT  
 a. Bright b. Cloudy 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

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (*Circle One*):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (*Circle One*):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight – pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (*Circle One*):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (*Circle One*):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (*Circle One*):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (*Circle One*):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

\_\_\_\_\_

12. The edges of the object were:

- (*Circle One*):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13. Did the object:

(*Circle One* for each question)

- |   |     |    |            |
|---|-----|----|------------|
| a. Appear to stand still at any time?           | Yes | No | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes | No | Don't know |
| c. Break up into parts or explode?              | Yes | No | Don't know |
| d. Give off smoke?                              | Yes | No | Don't know |
| e. Change brightness?                           | Yes | No | Don't know |
| f. Change shape?                                | Yes | No | Don't know |
| g. Flash or flicker?                            | Yes | No | Don't know |
| h. Disappear and reappear?                      | Yes | No | Don't know |

14. Did the object disappear while you were watching it? If so, how?

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):      Yes      No       Don't Know.      IF you answered YES, then tell what it moved behind: \_\_\_\_\_

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):      Yes      No       Don't Know.      IF you answered YES, then tell what in front of: \_\_\_\_\_

17. Tell in a few words the following things about the object:

a. Sound no sounds just <sup>movement</sup> fast any way

b. Color Bright gold color

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? none

It was the size of a saucer

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.



West to Vandala in one time flat.  
One appeared over bright star field



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? Too fast

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? 16 miles

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? 25 miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)

Yes

No

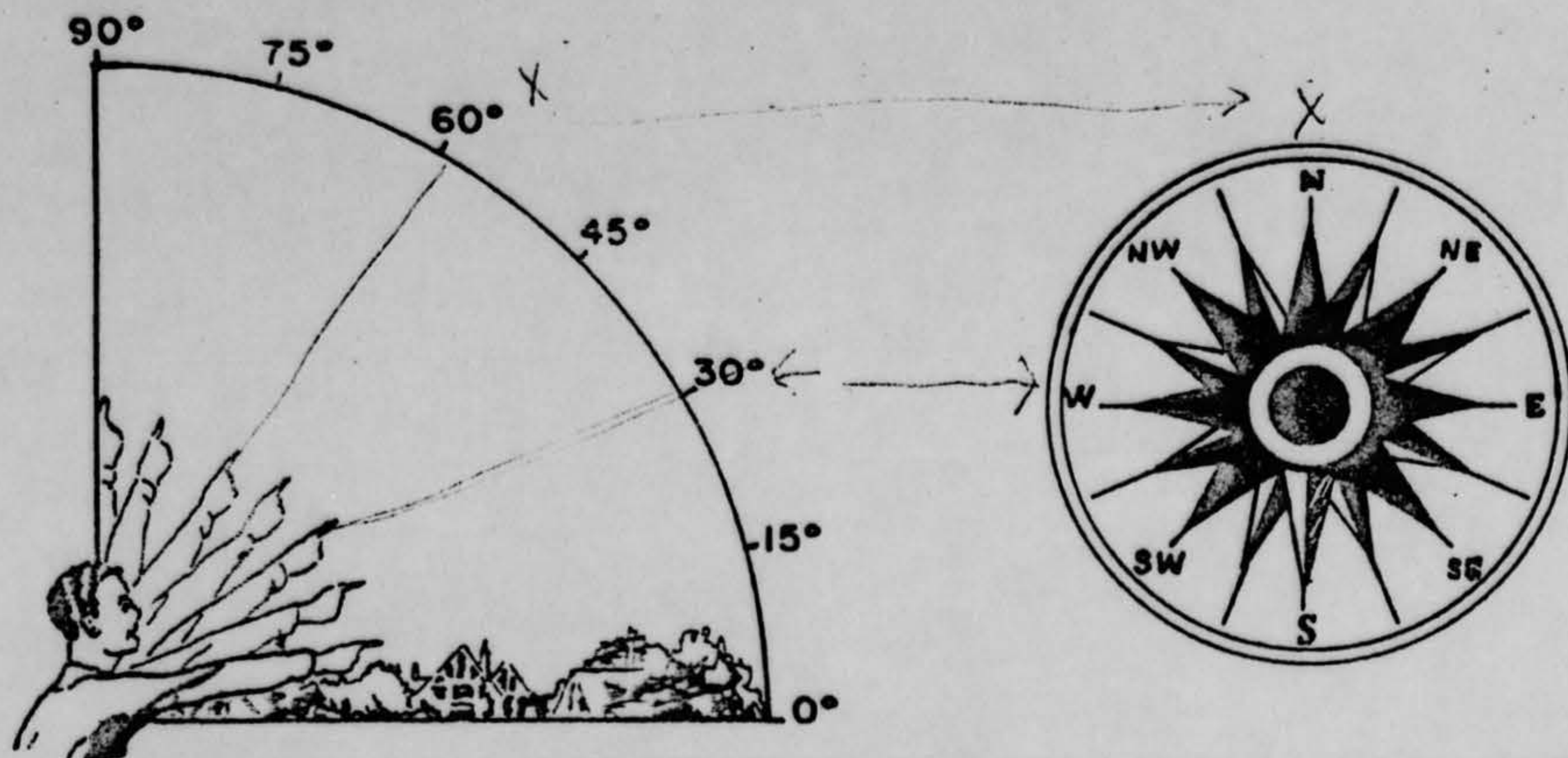
25. Did you observe the object through any of the following?

- |                 |   |    |               |                           |    |
|-----------------|---|----|---------------|---------------------------|----|
| a. Eyeglasses   | Yes                                     | No | e. Binoculars | Yes                       | No |
| b. Sun glasses  | Yes                                     | No | f. Telescope  | Yes                       | No |
| c. Windshield   | Yes <input checked="" type="checkbox"/> | No | g. Theodolite | Yes                       | No |
| d. Window glass | Yes <input checked="" type="checkbox"/> | No | h. Other      | <u>Plain eyes outside</u> |    |

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.

Saucer split a little

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.

*It shows over a transport going to Vandilla  
and flasher - just like taking a picture the followed  
it to Vandilla at 1:10 P.M.*

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.



30. Have you ever seen this, or a similar object before. If so give date or dates and location.

31. Was anyone else with you at the time you saw the object? (Circle One) Yes  No

31.1 IF you answered YES, did they see the object too? (Circle One) Yes  No

31.2 Please list their names and addresses:

~~\_\_\_\_\_ Ave~~

32. Please give the following information about yourself:

NAME ~~\_\_\_\_\_~~ ~~\_\_\_\_\_~~ \_\_\_\_\_  
Last Name First Name Middle Name

ADDRESS ~~\_\_\_\_\_~~ ~~\_\_\_\_\_~~ ~~\_\_\_\_\_~~ ~~\_\_\_\_\_~~ ~~\_\_\_\_\_~~  
City Zone State

TELEPHONE NUMBER \_\_\_\_\_ AGE 56 SEX F

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

I was never interested in the sky till Martha got me started looking now I can see things I'd never would believe.

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

8 9 66  
Day Month Year

34. Date you completed this questionnaire:

8

Day

9

Month

66

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.

on the 3 day 8-3-66 one followed  
transport plane to Vandilla

the other followed another plane  
at 1:20 going to Wright field.

on the 8-4-66 the same  
two objects were at the field but  
didn't move just a little.

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 names and addresses]

*Dayton, Ohio 45432  
(children also observed object through windows)*

32. Please give the following information about yourself:

NAME [Redacted] [Redacted] [Redacted]  
Last Name First Name Middle Name

ADDRESS [Redacted] Dayton 32 Ohio  
Street City Zone State

TELEPHONE NUMBER [Redacted] AGE 35 SEX F

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

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

3 Aug. 196 Next door neighbor called W.P. U.S.B.  
Day Month Year

PROJECT 10073 RECORD

<b>1. DATE - TIME GROUP</b> 8 August 66 09/0445Z	<b>2. LOCATION</b> Dayton, Ohio (3 witnesses)
<b>3. SOURCE</b> Civilian	<b>10. CONCLUSION</b> Astro (S/P) ✓ <i>fact</i> Capella at 38° azimuth & 11° elevation at 2345 EST.
<b>4. NUMBER OF OBJECTS</b> One	
<b>5. LENGTH OF OBSERVATION</b> 45 minutes	<b>11. BRIEF SUMMARY AND ANALYSIS</b> Object was at times, different colors and appeared to get brighter at times too. Object flashed and flickered and was <u>stationary</u> . Red, yellow, green and white color. Object went out of sight over horizon. When first observed object was at approximately 50° elevation and last observed at 40°.
<b>6. TYPE OF OBSERVATION</b> Ground Visual	
<b>7. COURSE</b> East	
<b>8. PHOTOS</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>9. PHYSICAL EVIDENCE</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

FORM

**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.

<p>1. When did you see the object?</p> <p><u>8 Aug</u>      <u>'66</u></p> <p style="font-size: small;">Day                      Month                      Year</p>	<p>2. Time of day: <u>2345</u></p> <p style="font-size: x-small; text-align: center;">Hour                      Minutes</p> <p>(Circle One):      A.M.      or      P.M.</p>
<p>3. Time Zone:</p> <p>(Circle One):    a. Eastern                       b. Central                       c. Mountain                       d. Pacific                       e. Other _____</p> <p>(Circle One):    a. Daylight Saving                       b. Standard</p>	
<p>4. Where were you when you saw the object?</p> <p><u>[Redacted]</u>      <u>Dayton</u></p> <p style="font-size: x-small;">Nearest Postal Address                      City or Town                      State or County</p>	
<p>5. How long was object in sight? (Total Duration)      <u>45</u></p> <p style="font-size: x-small; text-align: center;">Hours                      Minutes                      Seconds</p> <p>a. Certain                      c. Not very sure b. Fairly certain              d. Just a guess</p> <p>5.1 How was time in sight determined? <u>guess</u></p> <p>5.2 Was object in sight continuously?    <input checked="" type="radio"/> Yes      No _____</p>	
<p>6. What was the condition of the sky?</p> <p style="text-align: center;">DAY                      NIGHT</p> <p>a. Bright                      a. Bright      <u>clear</u> b. Cloudy                      b. Cloudy</p>	
<p>7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?</p> <p>(Circle One):    a. In front of you              d. To your left                       b. In back of you              e. Overhead                       c. To your right                f. Don't remember</p>	

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 *different color*

e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

a. Brighter *at times*

b. Dimmer

c. About the same

d. Don't know

11.1 Compare brightness to some common object:

\_\_\_\_\_

12. The edges of the object were:

(Circle One):

- a. Fuzzy or blurred
- b. Like a bright star
- c. Sharply outlined
- d. Don't remember

e. Other \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. Did the object:

(Circle One for each question)

- a. Appear to stand still at any time?
- b. Suddenly speed up and rush away at any time?
- c. Break up into parts or explode?
- d. Give off smoke?
- e. Change brightness?
- f. Change shape?
- g. Flash or flicker?
- h. Disappear and reappear?

- Yes
- Yes
- Yes
- Yes
- Yes
- Yes
- Yes
- Yes

- No
- No
- No
- No
- No
- No
- No
- No

- Don't know
- Don't know
- Don't know
- Don't know
- Don't know
- Don't know
- Don't know
- Don't know

*when plane went by*



14. Did the object disappear while you were watching it? If so, how?

*beyond 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 NO sound

b. Color red, yellow, green, & 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?

*couldn't tell  
possibly star size*

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

c. East

e. South

g. West

b. Northeast

d. Southeast

f. Southwest

h. Northwest

24.2 How fast were you moving? \_\_\_\_\_ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)

Yes

No

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

a. Eyeglasses

Yes

No

e. Binoculars

Yes

No

b. Sun glasses

Yes

No

f. Telescope

Yes

No

c. Windshield

Yes

No

g. Theodolite

Yes

No

d. Window glass

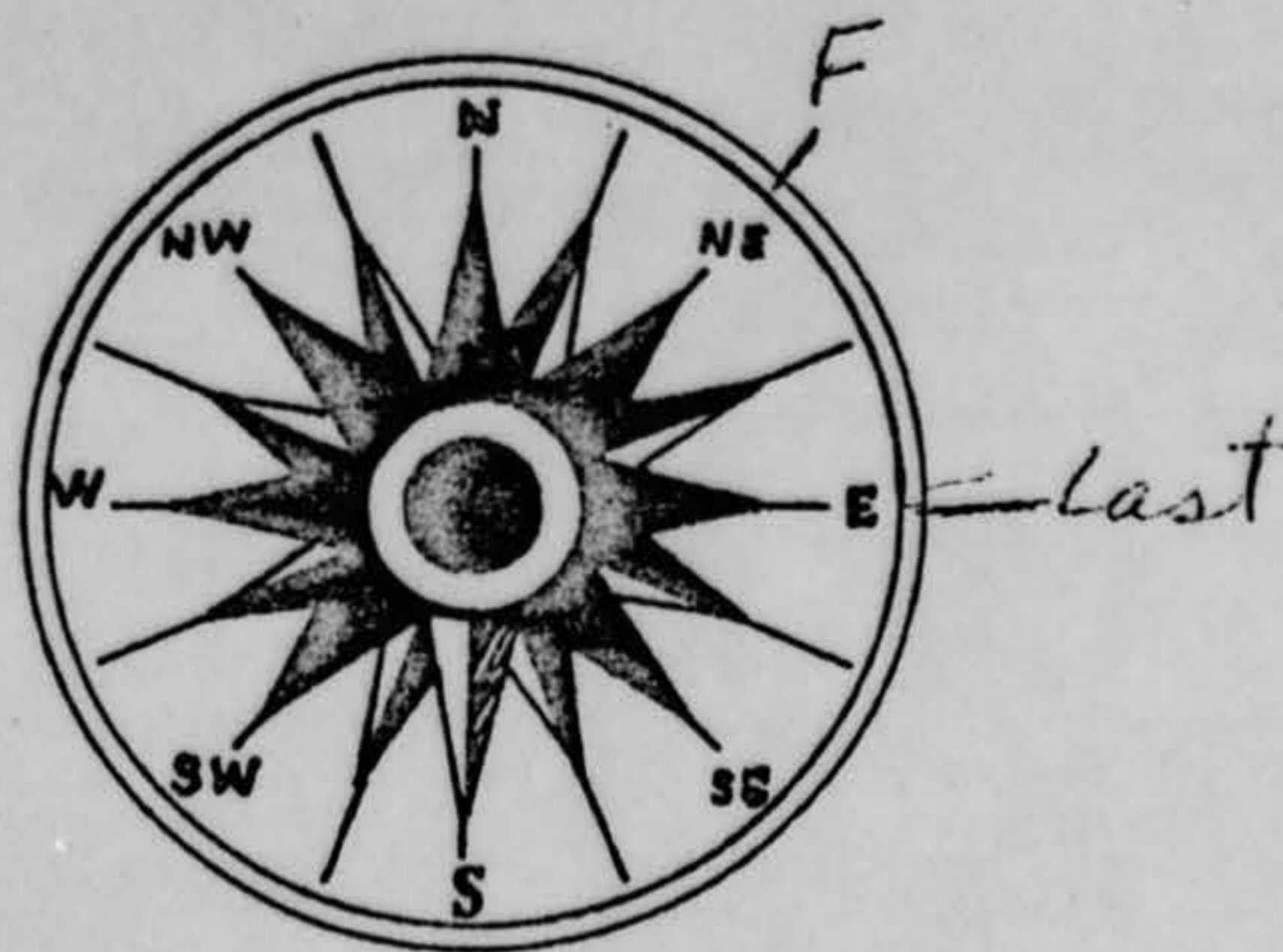
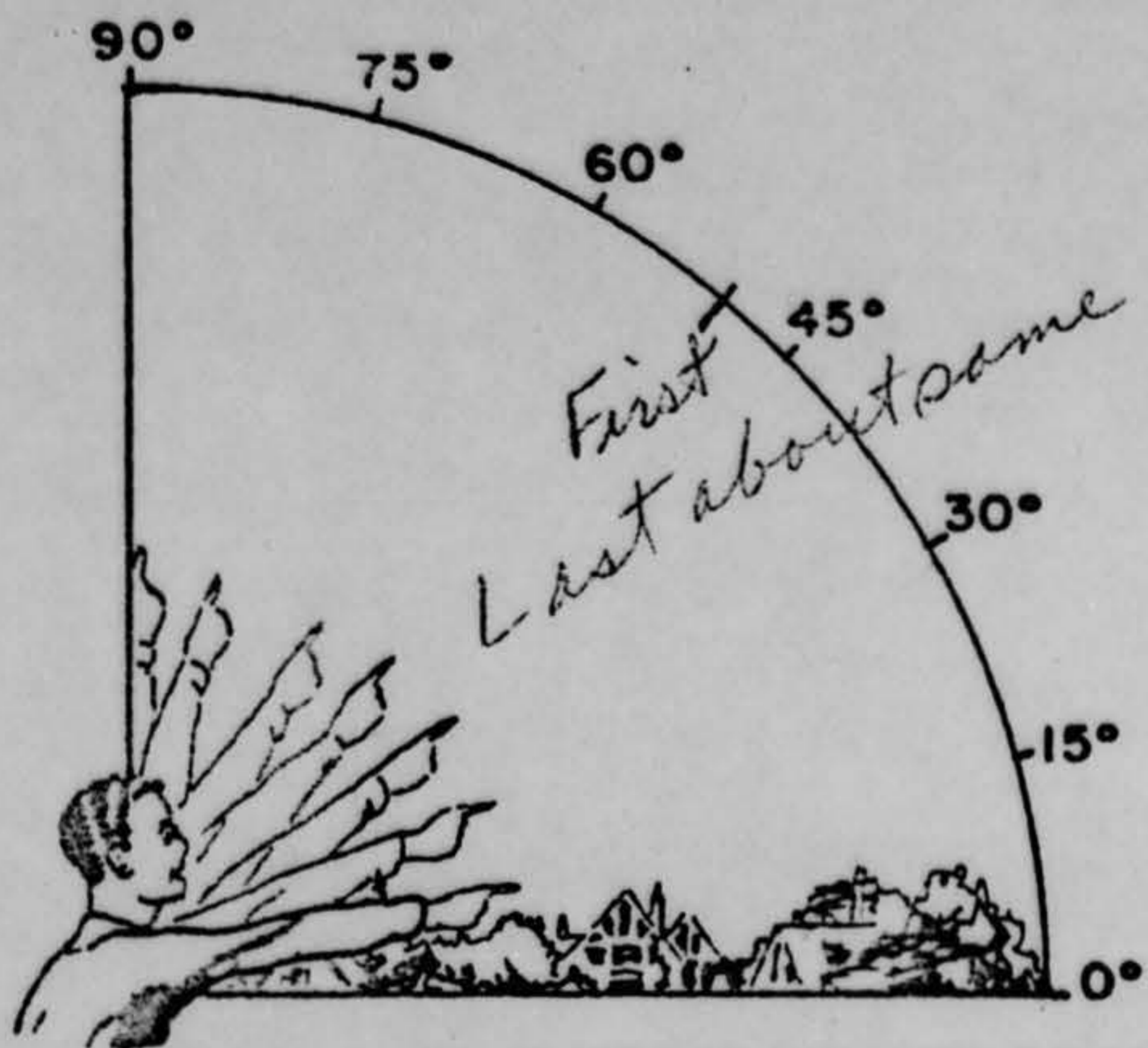
Yes

No

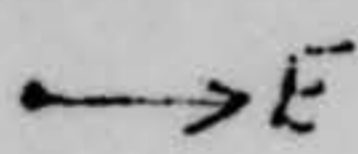
h. Other \_\_\_\_\_

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

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



29. IF there was MORE THAN ONE object, then how many were there? \_\_\_\_\_  
 Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

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:

2. [Redacted] Dayton  
3. [Redacted] "

32. Please give the following information about yourself:

NAME [Redacted] [Redacted] [Redacted]  
Last Name First Name Middle Name

ADDRESS [Redacted] [Redacted] [Redacted] [Redacted]  
Street City Zone State

TELEPHONE NUMBER No phone AGE 37 SEX F

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

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

9 Aug 66 FTD  
Day Month Year

34. Date you completed this questionnaire:

19 Aug 66  
Day Month Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

PROJECT 10073 RECORD

1. DATE - TIME GROUP 17 August 66 18/0325Z	2. LOCATION Dayton, Ohio (2 Witnesses)
3. SOURCE Civilians	10. CONCLUSION Possible (AIRCRAFT) ✓ <i>270</i>
4. NUMBER OF OBJECTS Two	No data presented to indicate object could not have been an A/C.
5. LENGTH OF OBSERVATION 1 Minute	11. BRIEF SUMMARY AND ANALYSIS Observer noted star like objects (two) traveling toward the SE.
6. TYPE OF OBSERVATION Ground-Visual	Lights looked like an aircraft, but no red light was observed, only white.
7. COURSE SE	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

**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?

17      Aug      66  
Day      Month      Year

2. Time of day: 1025 \_\_\_\_\_  
   Hour      Minutes

(Circle One):      A.M.      or      P.M.

3. Time Zone:

(Circle One): a. Eastern  
b. Central  
c. Mountain  
d. Pacific  
e. Other \_\_\_\_\_

(Circle One): a. Daylight Saving  
b. Standard

4. Where were you when you saw the object?

   Rd      Dayton      Ohio  
Nearest Postal Address      City or Town      State or County

5. How long was object in sight? (Total Duration)

0      1      —  
Hours      Minutes      Seconds

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

5.1 How was time in sight determined? Estimate

5.2 Was object in sight continuously?      Yes X      No \_\_\_\_\_

6. What was the condition of the sky?

DAY      NIGHT  
a. Bright      a. Bright  
b. Cloudy      b. Cloudy

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object? N/A

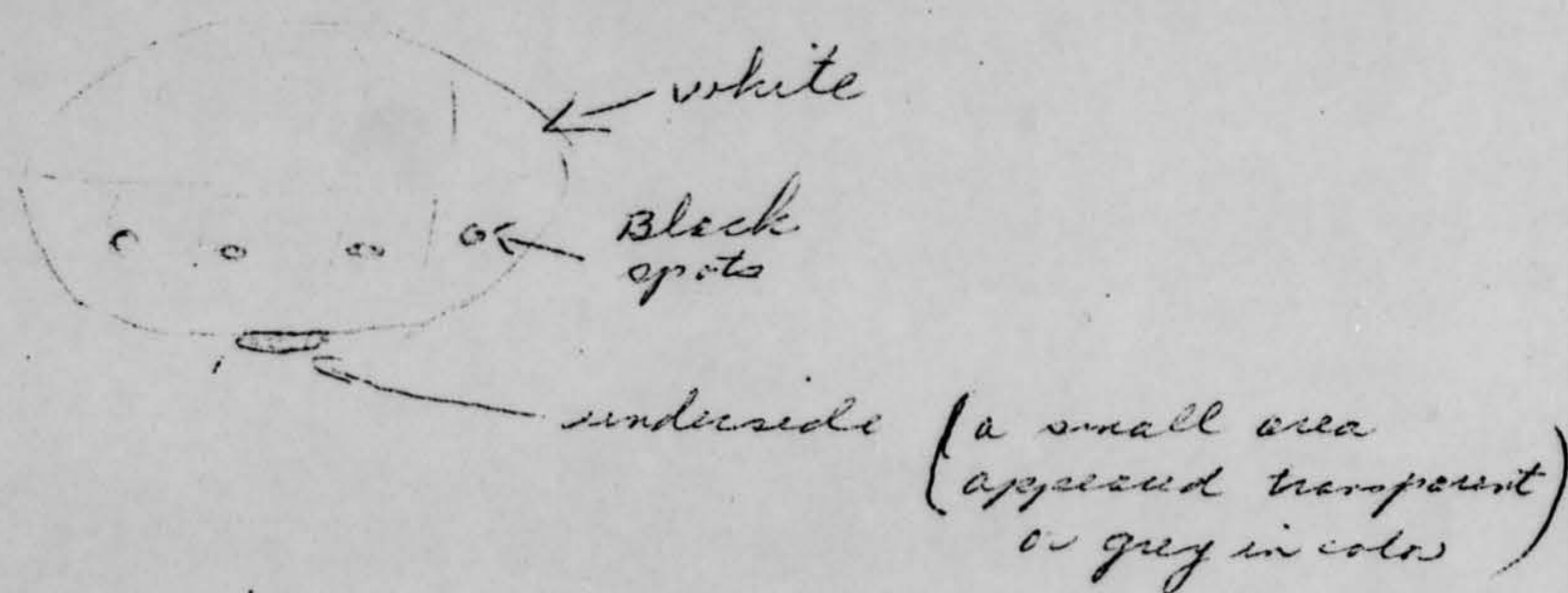
(Circle One): a. In front of you      d. To your left  
b. In back of you      e. Overhead  
c. To your right      f. Don't remember

34. Date you completed this questionnaire:

10  
Day
Aug.  
Month
1966  
Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

This object appeared to be white in color with black (or dark) markings on the lower half. They appeared to be of equal distance apart. I could see the under side, and it appeared to have a transparent or grey color.



The binoculars which I observed this object through supposedly have a range of 5 mi.



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:

*Like car lights, but not sure*

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 | <input checked="" type="radio"/> No | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes | <input checked="" type="radio"/> No | Don't know |
| c. Break up into parts or explode?              | Yes | <input checked="" type="radio"/> No | Don't know |
| d. Give off smoke?                              | Yes | <input checked="" type="radio"/> No | Don't know |
| e. Change brightness?                           | Yes | <input checked="" type="radio"/> No | Don't know |
| f. Change shape?                                | Yes | <input checked="" type="radio"/> No | Don't know |
| g. Flash or flicker?                            | Yes | <input checked="" type="radio"/> No | Don't know |
| h. Disappear and reappear?                      | Yes | <input checked="" type="radio"/> No | Don't know |

14. Did the object disappear while you were watching it? If so, how?

*Yes, suddenly disappeared - could not further describe disappearance.*

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: *Passed another star.*

17. Tell in a few words the following things about the object:

a. Sound *None*

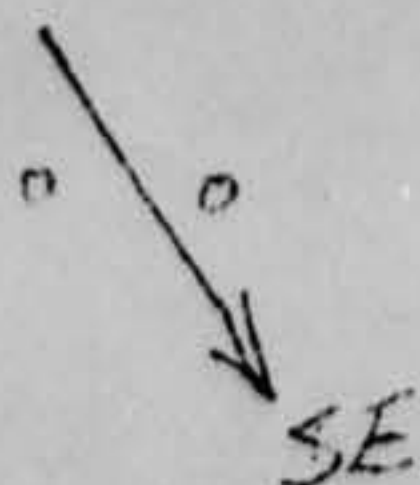
b. Color *White*

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?

*A little of it (very vague)*

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.

*It was two lights.*



20. Do you think you can estimate the speed of the object?

(Circle One)

Yes

No *It was very fast.*

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 *It was high up (6000 FT or so.)*

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) *N/A*

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

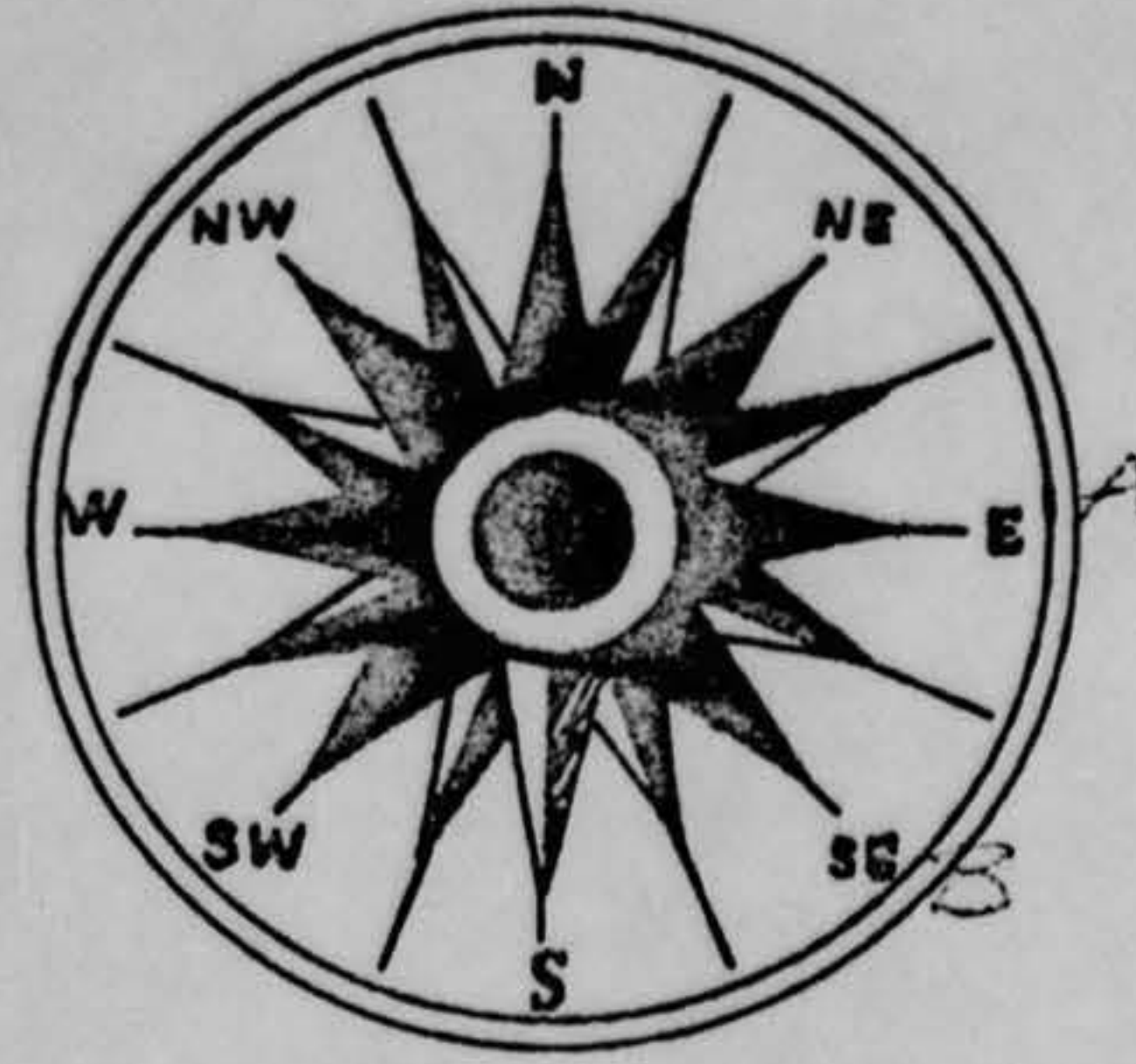
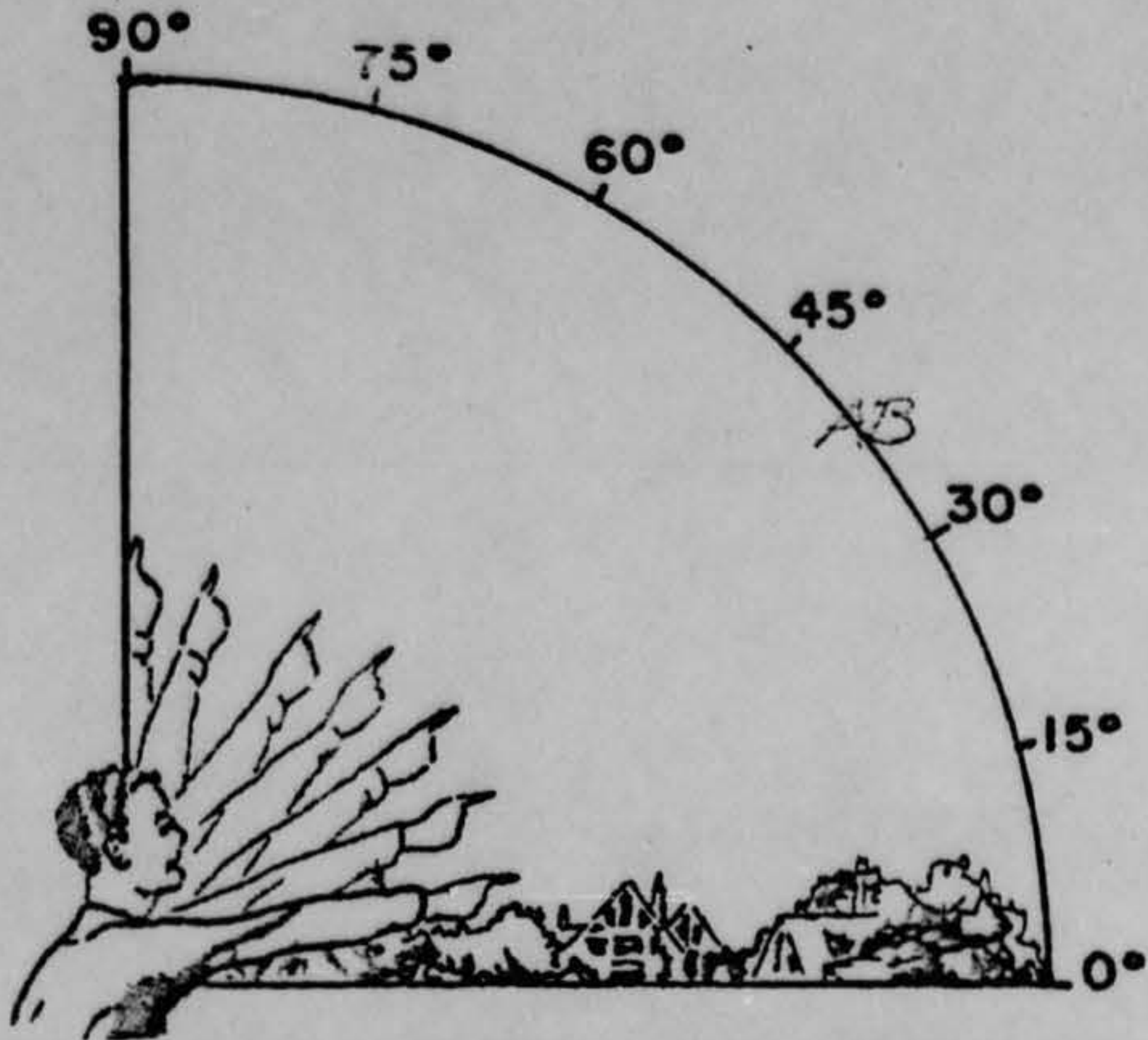
No

h. Other \_\_\_\_\_

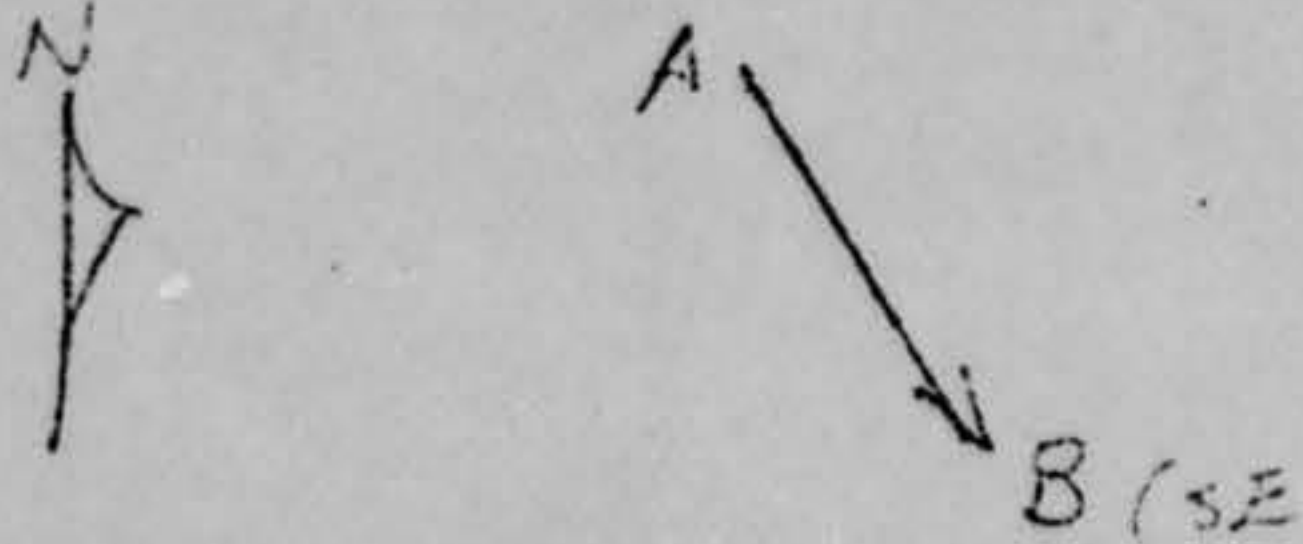
26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

*It looked like an airplane but had no red light.  
Suddenly disappeared.*

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.



*No direction change.*

29. IF there was MORE THAN ONE object, then how many were there? Two lights  
 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:

[Redacted Name], Dayton 15, Ohio.

32. Please give the following information about yourself:

NAME [Redacted] [Redacted] [Redacted]  
Last Name First Name Middle Name

ADDRESS [Redacted] Dayton 5 Ohio  
Street City Zone State

TELEPHONE NUMBER [Redacted] AGE 15 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?


17 Aug 66 FTD Duty Offices  
Day Month Year

34. Date you completed this questionnaire:

17      Aug      66  
Day      Month      Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

*Was sitting outside. Thought he saw a star, but it was moving. There was no noise. Showed it to his friend. Watched about a minute. Then it suddenly disappeared.*

  
*Capt, USAF  
1570 Duty Officer*

1. DATE - TIME GROUP 21 August 66 22/0250Z		2. LOCATION Dayton, Ohio	
3. SOURCE Civilian		10. CONCLUSION INSUFFICIENT DATA FOR EVALUATION	
4. NUMBER OF OBJECTS One			
5. LENGTH OF OBSERVATION Several Minutes			
6. TYPE OF OBSERVATION Ground-Visual			
7. COURSE Not Reported			
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		11. BRIEF SUMMARY AND ANALYSIS  SEE CASE	
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.

Dayton, Ohio 21 Aug - 66

FTD (TDETR) /*he*  
Wright-Patterson AFB, Ohio 45433  
23 August 1966

Mrs. [REDACTED]  
Dayton, Ohio 45415

Dear [REDACTED]

Reference your unidentified observation of 21 August 1966.  
The information which we have received is not sufficient  
for evaluation. Request you complete the attached FTD  
Form 164 and return it in the envelope provided.

We wish to thank you for reporting your observation to  
the Air Force.

Sincerely,

*H*  
HECTOR QUINTANILLA, Jr, Major, USAF  
Chief, Project Blue Book

OFFICIAL FILE COPY

TDETR  
Office of Record



**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.

<p>1. When did you see the object?</p> <p><u>21 Aug 66</u>  <small>Day                      Month                      Year</small></p>	<p>2. Time of day: <u>2150</u>  <small>Hour                      Minutes</small></p> <p>(Circle One):      A.M.      or      <input checked="" type="radio"/> P.M.</p>
<p>3. Time Zone:</p> <p>(Circle One): <input checked="" type="radio"/> a. Eastern                            <input type="radio"/> b. Central                            <input type="radio"/> c. Mountain                            <input type="radio"/> d. Pacific                            <input type="radio"/> e. Other _____</p> <p>(Circle One):    a. Daylight Saving                                <input type="radio"/> b. Standard</p>	
<p>4. Where were you when you saw the object?</p> <p><u>DAYTON</u>  <small>Nearest Postal Address                      City or Town                      State or County</small></p>	
<p>5. How long was object in sight? (Total Duration) <u>Several minutes</u>  <small>Hours                      Minutes                      Seconds</small></p> <p><input checked="" type="radio"/> a. Certain                      c. Not very sure  <input type="radio"/> b. Fairly certain                      d. Just a guess</p> <p>5.1 How was time in sight determined? _____</p> <p>5.2 Was object in sight continuously?    Yes _____    No _____</p>	
<p>6. What was the condition of the sky?</p> <p><b>DAY</b>                      <b>NIGHT</b>  <input type="radio"/> a. Bright                      <input checked="" type="radio"/> a. Bright  <input type="radio"/> b. Cloudy                      <input type="radio"/> b. Cloudy</p>	
<p>7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?</p> <p>(Circle One):    a. In front of you                      d. To your left                                <input type="radio"/> b. In back of you                      e. Overhead                                <input type="radio"/> c. To your right                      <input type="radio"/> f. Don't remember</p>	

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

\_\_\_\_\_

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
  - b. Like a bright star
  - c. Sharply outlined
  - d. Don't remember

e. Other \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13. Did the object:

*up & down*  
*appear & disappear*

(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 |

PROJECT 10073 RECORD

<b>1. DATE - TIME GROUP</b> 3 August 69 04/0030Z	<b>2. LOCATION</b> Dayton, Ohio (3 witnesses)
<b>3. SOURCE</b> Civilian	<b>10. CONCLUSION</b> Possible (AIRCRAFT) <i>looks more like                  w/ balloon to me                  Jelt</i>
<b>4. NUMBER OF OBJECTS</b> One	
<b>5. LENGTH OF OBSERVATION</b> 10 Minutes	<b>11. BRIEF SUMMARY AND ANALYSIS</b> Observers saw an object that looked to be solid with the sun reflecting off of it. Object compared to an aircraft at about vapor trail altitude. Object moved straight out and up. Observers stated that they knew object was not Swamp can.
<b>6. TYPE OF OBSERVATION</b> Ground-Visual	
<b>7. COURSE</b> SE	
<b>8. PHOTOS</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>9. PHYSICAL EVIDENCE</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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? fast

21. Do you think you can estimate how far away from you the object was?

(Circle One)      Yes      No

IF you answered YES, then how far away would you say it was? \_\_\_\_\_

22. Where were you located when you saw the object?

(Circle One):

- a. Inside a building
- b. In a car
- c. Outdoors
- d. In an airplane (type) \_\_\_\_\_
- e. At sea
- f. Other \_\_\_\_\_

23. Were you (Circle One)

- a. In the business section of a city?
- b. In the residential section of a city?
- c. In open countryside?
- d. Near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other \_\_\_\_\_

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

- |              |              |              |              |
|--------------|--------------|--------------|--------------|
| a. North     | c. East      | e. South     | g. West      |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

24.2 How fast were you moving? \_\_\_\_\_ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)      Yes      No

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

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

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

14. Did the object disappear while you were watching it? If so, how?

*Appear + disappear*

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 \_\_\_\_\_

b. Color \_\_\_\_\_

*white*

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails.

Place an arrow beside the drawing to show the direction the object was moving.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

31. Was anyone else with you at the time you saw the object? (Circle One)      Yes      No

31.1 IF you answered YES, did they see the object too? (Circle One)      Yes      No

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

NAME \_\_\_\_\_  
Last Name                              First Name                              Middle Name

ADDRESS \_\_\_\_\_ DAYTON \_\_\_\_\_  
Street                              City                              Zone                              State

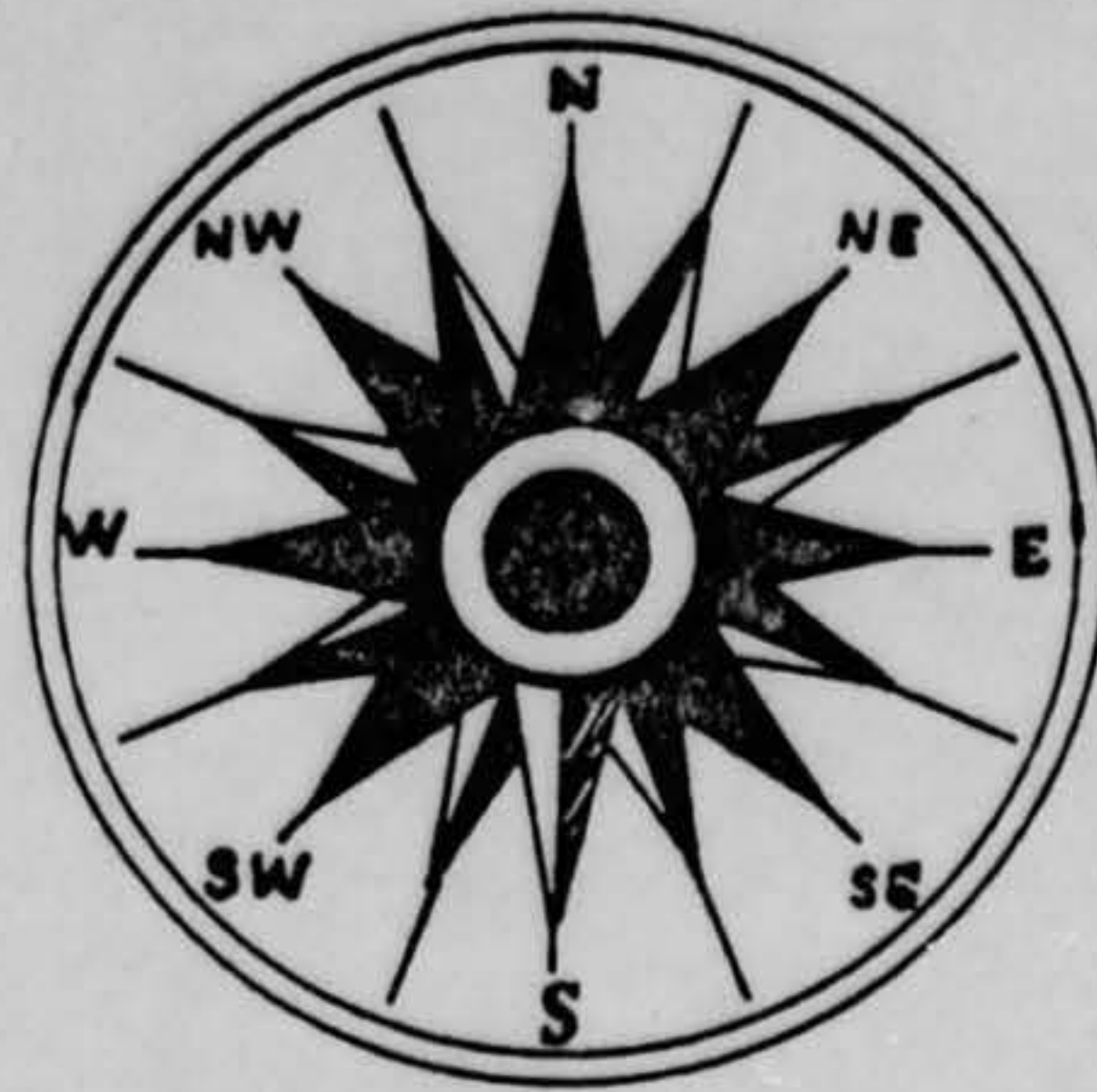
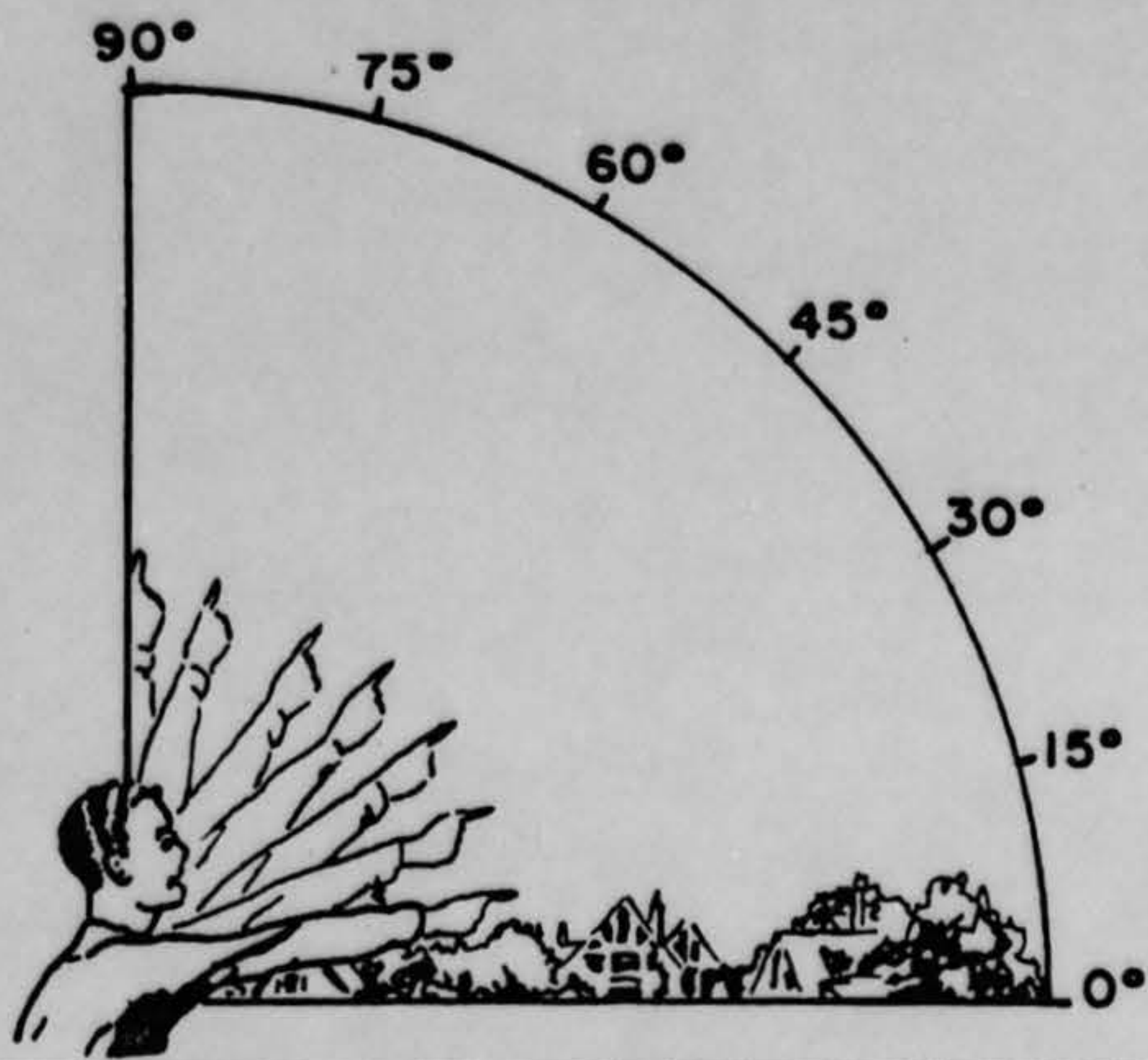
TELEPHONE NUMBER \_\_\_\_\_ AGE \_\_\_\_\_ SEX \_\_\_\_\_

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

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

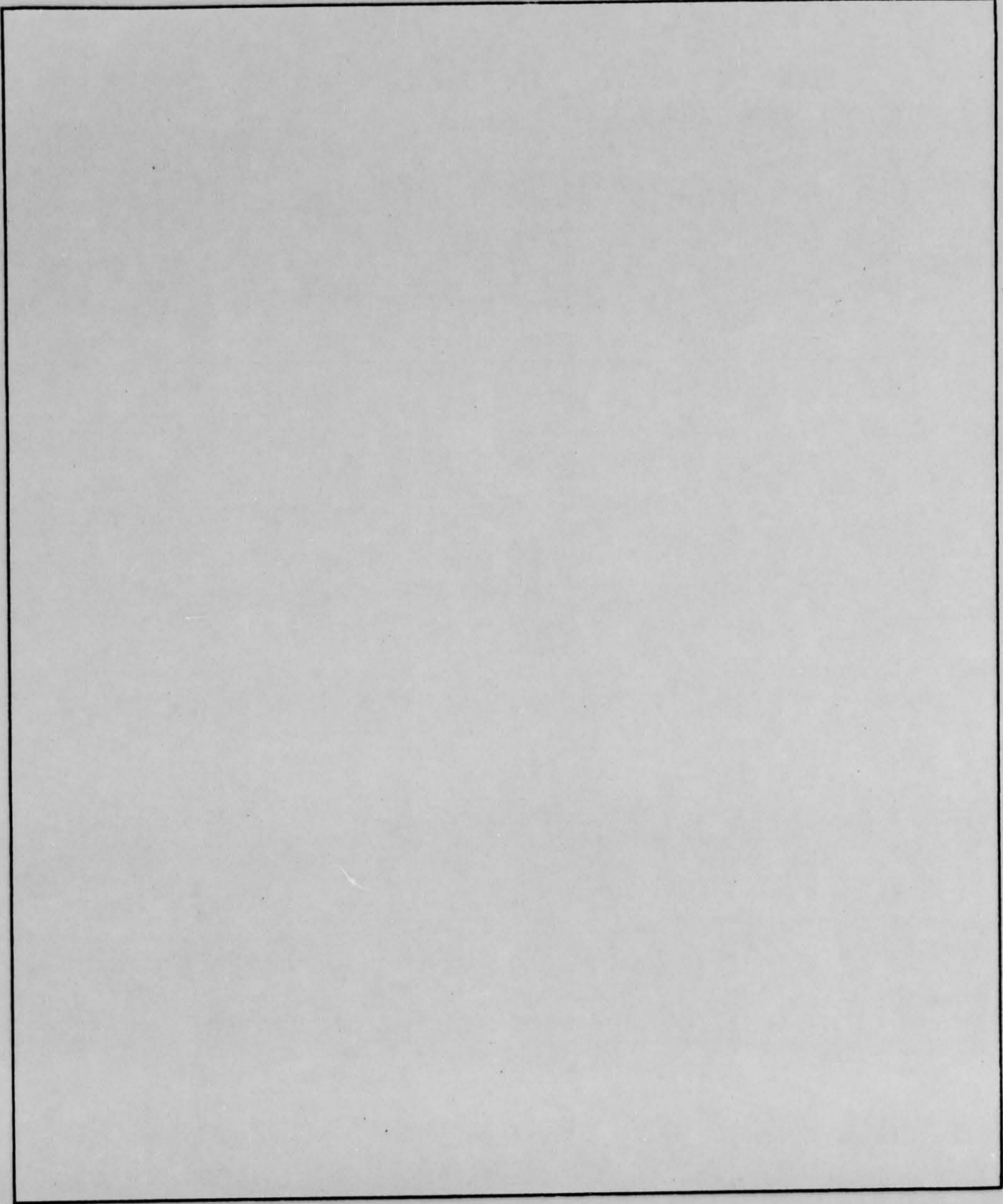
\_\_\_\_\_  
Day                              Month                              Year

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.





34. Date you completed this questionnaire:

\_\_\_\_\_ Day \_\_\_\_\_ Month \_\_\_\_\_ Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

*Party office*

PROJECT 10073 RECORD

1. DATE - TIME GROUP 21 August 66 22/0230Z	2. LOCATION Dayton, Ohio (2 Witnesses)
3. SOURCE Civilian	10. CONCLUSION Satellite (ECHO I) ✓
4. NUMBER OF OBJECTS One	ECHO I was over (88W-47N) at 0233Z.
5. LENGTH OF OBSERVATION 10 Minutes	11. BRIEF SUMMARY AND ANALYSIS Observers noted star like object, white in color traveling to the East. The object was compared to a slow moving star. Observer was looking to the North when Echo I was at (88W-47N) (0233Z).
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE E	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

*Handwritten initials*

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:

a 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 | <input checked="" type="radio"/> No | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes | <input checked="" type="radio"/> No | Don't know |
| c. Break up into parts or explode?              | Yes | <input checked="" type="radio"/> No | Don't know |
| d. Give off smoke?                              | Yes | <input checked="" type="radio"/> No | Don't know |
| e. Change brightness?                           | Yes | <input checked="" type="radio"/> No | Don't know |
| f. Change shape?                                | Yes | <input checked="" type="radio"/> No | Don't know |
| g. Flash or flicker?                            | Yes | <input checked="" type="radio"/> No | Don't know |
| h. Disappear and reappear?                      | Yes | <input checked="" type="radio"/> No | Don't know |

**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?

21 August \_\_\_\_\_  
Day Month Year

2. Time of day: 9 30  
Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern  
b. Central  
c. Mountain  
d. Pacific  
e. Other \_\_\_\_\_

(Circle One): a. Daylight Saving  
b. Standard

4. Where were you when you saw the object?

\_\_\_\_\_  
Nearest Postal Address

\_\_\_\_\_  
City or Town

\_\_\_\_\_  
State or County

5. How long was object in sight? (Total Duration)

\_\_\_\_\_ 10 \_\_\_\_\_  
Hours Minutes Seconds

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

5.1 How was time in sight determined? Guessing

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. In back of you  
c. To your right  
d. To your left  
e. Overhead  
f. Don't remember

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 *on porch*

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.

*a fairly slow moving star.*