

PROJECT 10073 RECORD

<b>1. DATE - TIME GROUP</b> 4 May 66 05/0310 Z	<b>2. LOCATION</b> COLUMBUS, OHIO (1 witness)
<b>3. SOURCE</b> civilian	<b>10. CONCLUSION</b> INSUFFICIENT DATA FOR EVALUATION
<b>4. NUMBER OF OBJECTS</b> number two	FTD Form 164 sent to witness, however, not returned after 30 days. Will re-evaluate if further info is received.
<b>5. LENGTH OF OBSERVATION</b> 1½ mins	<b>11. BRIEF SUMMARY AND ANALYSIS</b> Object brighter than the moon, but similar to the moon, stationary, appeared as a light. Looked like the moon - only two objects, observed for 1½ mins, reported to Lockbourne AFB. Insufficient data for evaluation.
<b>6. TYPE OF OBSERVATION</b> ground visual	
<b>7. COURSE</b> stationary	
<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	



4 MAY, 1966

WEATHER: CMA 04/2100E CLEAR 12 0906  
04/2200E CLEAR 15 1606  
04/2300E CLEAR 15 1104

WINDS: 4 MAY 1900 EST

5 m	2710
10 m	3020
15 m	3130
20 m	3135
30 m	2945
40 m	2960
50 m	2945



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:

\_\_\_\_\_ 100 WATT 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 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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?                           | <input checked="" type="radio"/> 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 JUST VANISHED

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 \_\_\_\_\_ NOISE

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?

1/8 inch

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? 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? 2 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? 20 MPH 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?

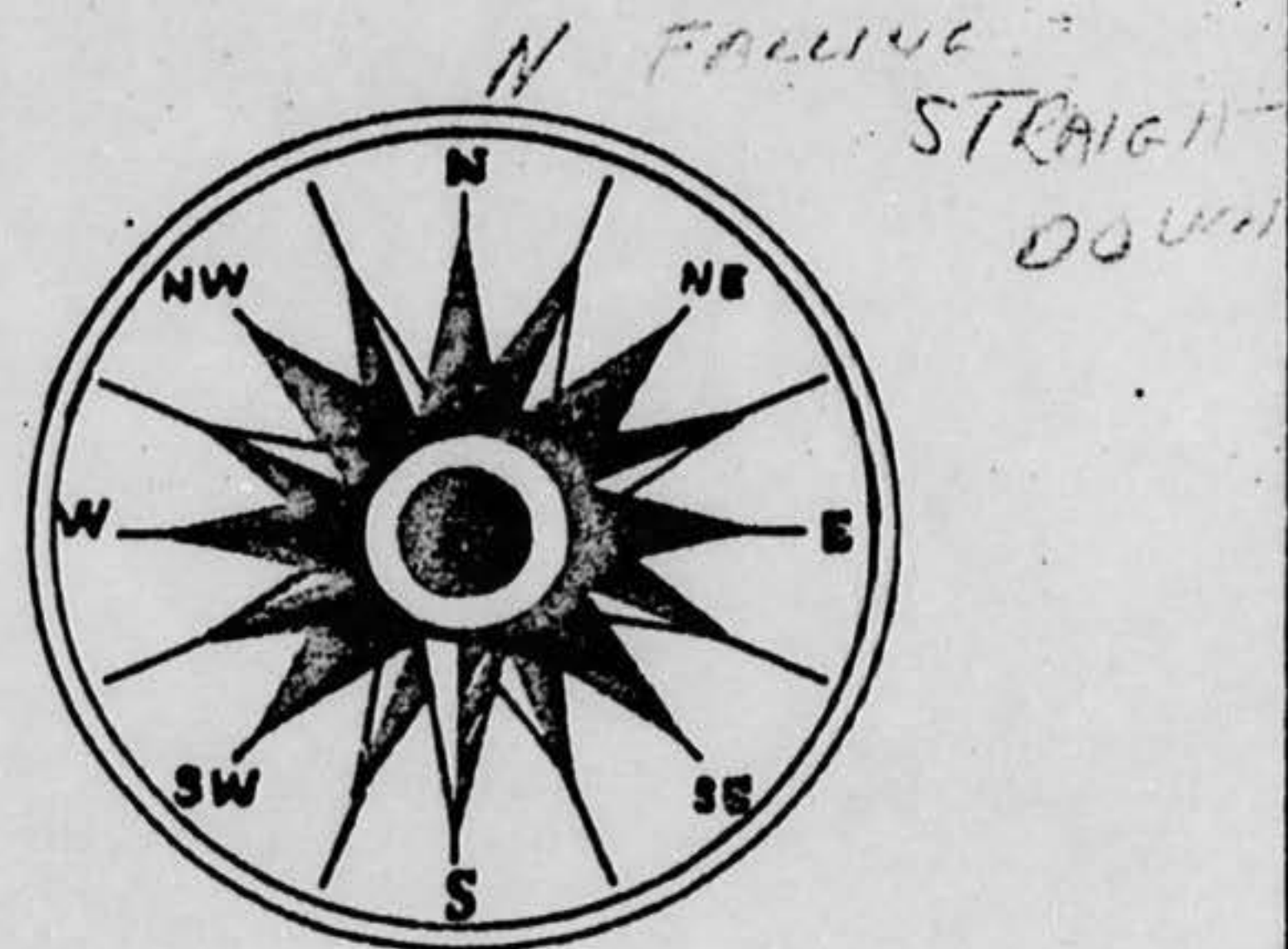
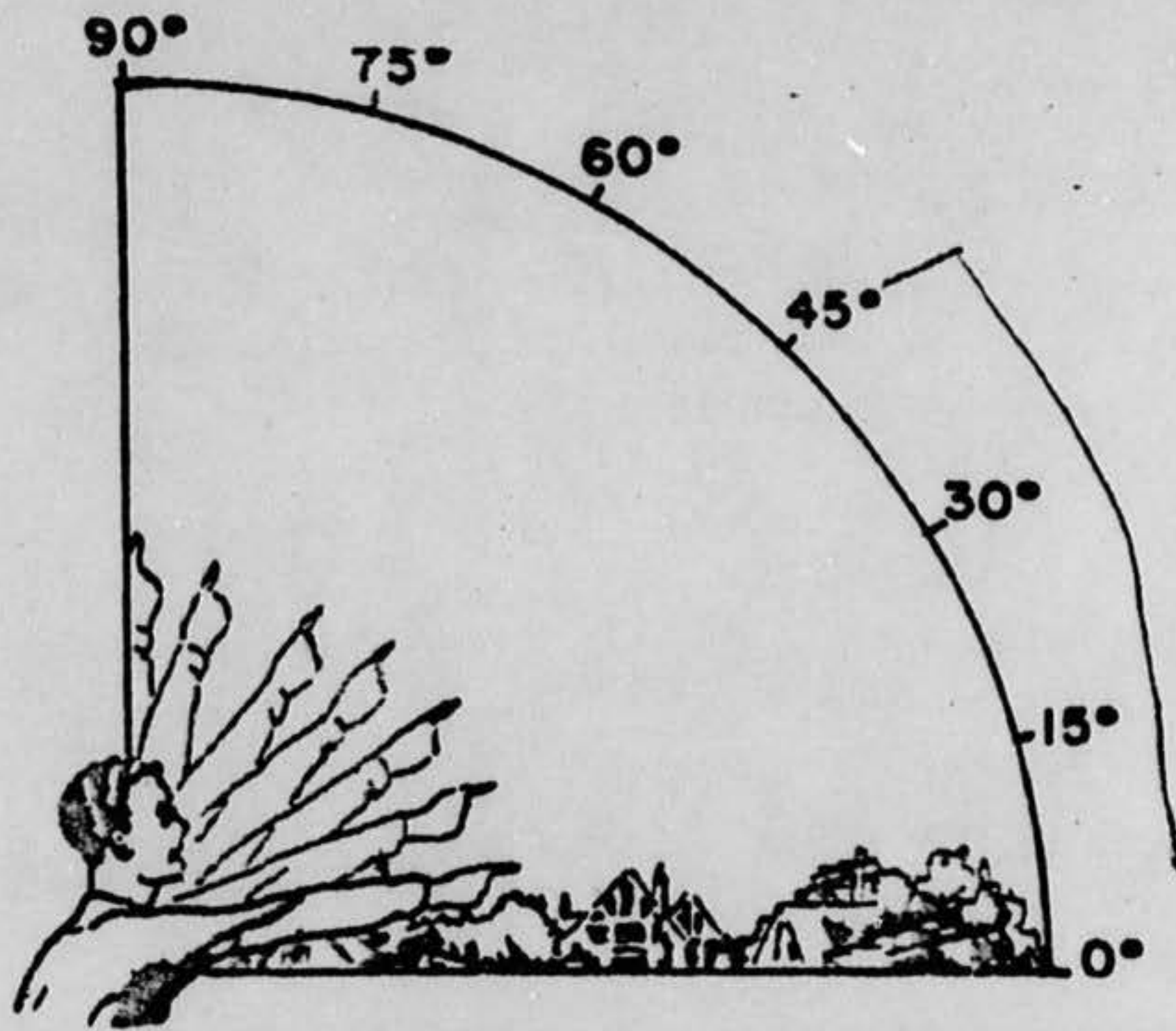
- |                 |                                      |                                     |                |                           |                                     |
|-----------------|--------------------------------------|-------------------------------------|----------------|---------------------------|-------------------------------------|
| 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 checked="" type="radio"/> | No <input 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.

A BASE BALL BATT



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? NO  
 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 30 YEARS AGO  
IN COLUMBUS

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] CLEVELAND OHIO

32. Please give the following information about yourself:

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

ADDRESS [REDACTED] COLUMBUS OH  
Street City Zone State

TELEPHONE NUMBER [REDACTED] AGE 42 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?

\_\_\_\_ 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.

1. WEATHER; LCK 2100E 1400 / - (11) 0000  
 2200E / - (11) 0000  
 2300E CLEAR 11 0000  
 30/0000E CLEAR 11 0000

2. WINDS; 29/1900 EST

5m	3310
10m	2825
15m	2855
20m	2865
30m	2785
40m	2870
50m	2635



COMMENTS OF PREPARING OFFICIAL:

The description and time of sighting coincides with a bright meteor which was seen in the Columbus, Lockbourne AFB area.

*James D. Ballsmith.*  
JAMES D. BALLSMITH  
Capt., USAF



9 August 66

Conversation with Mr. [REDACTED] provided new information on the case in question. Witness stated that object was observed for about 10 seconds instead of 10 minutes as initially reported. Object was brighter than a falling star and had a longer tail.



**PROJECT 10073 RECORD**

<b>1. DATE - TIME GROUP</b> 30 May 66 31/0020Z	<b>2. LOCATION</b> Columbus, Ohio (multiple)
<b>3. SOURCE</b> Civilian	<b>10. CONCLUSION</b> (other) INSUFFICIENT DATA FOR EVALUATION
<b>4. NUMBER OF OBJECTS</b> 1	
<b>5. LENGTH OF OBSERVATION</b> 55 minutes	<b>11. BRIEF SUMMARY AND ANALYSIS</b> SEE CASE
<b>6. TYPE OF OBSERVATION</b> Ground Visual	
<b>7. COURSE</b> E-W	
<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.

*Handwritten initials/signature*

1. When did you see the object?

30 Day      May Month      66 Year

2. Time of day:

31/0020Z  
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

ZULU

4. Where were you when you saw the object?

inter-x Frank Road # US 71 Columbus Ohio  
Nearest Postal Address      City or Town      State or County

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

0155  
Hours      Minutes      Seconds

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

5.1 How was time in sight determined?

Wrist watch

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 <u>slightly</u> | 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

*Send 164 to AFB 14*



PROJECT 10073 RECORD

1. DATE - TIME GROUP 5 May 66 06/0130Z	2. LOCATION Columbus, Ohio (1 witness)
3. SOURCE Civilian	10. CONCLUSION INSUFFICIENT DATA FOR EVALUATION
4. NUMBER OF OBJECTS One	FTD Form 164 sent to witness, however, not returned after 30 days. Will re-evaluate, if further info is received
5. LENGTH OF OBSERVATION 2 - 4 minutes	11. BRIEF SUMMARY AND ANALYSIS  Object as a light, was two times as bright as Jupiter, disappeared and re-appeared by fading. Color was like a white light. Sketchy information was received by Lockbourne AFB, Columbus, Ohio. Form 164 sent to get further info.
6. TYPE OF OBSERVATION Ground Visual	
7. COURSE unk	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	



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 | <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 \_\_\_\_\_

*no color until the sun went down then the object appeared to become silver color*

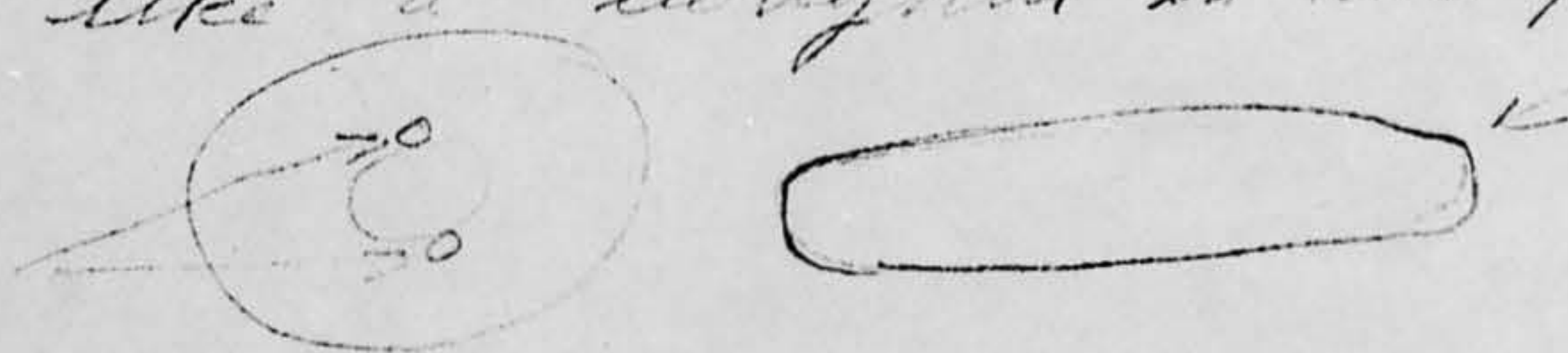
18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

*very small amount*

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.

*looked like a doughnut in this position*



*Ground:*



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? 3,000 to 5,000 feet

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?

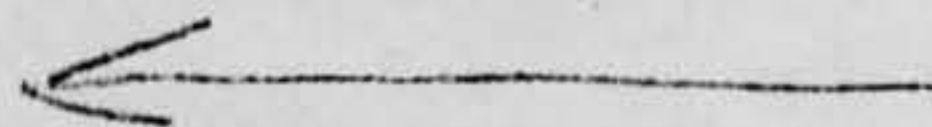
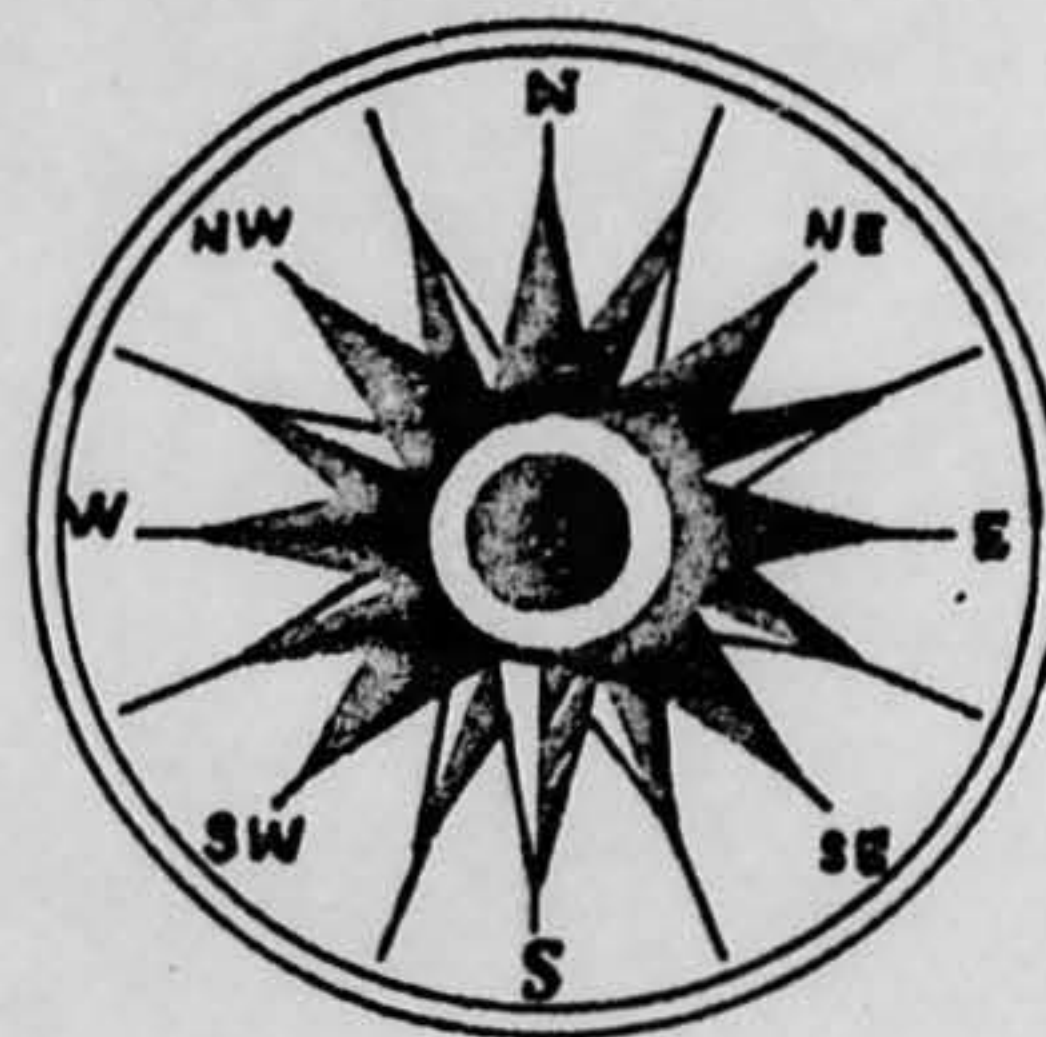
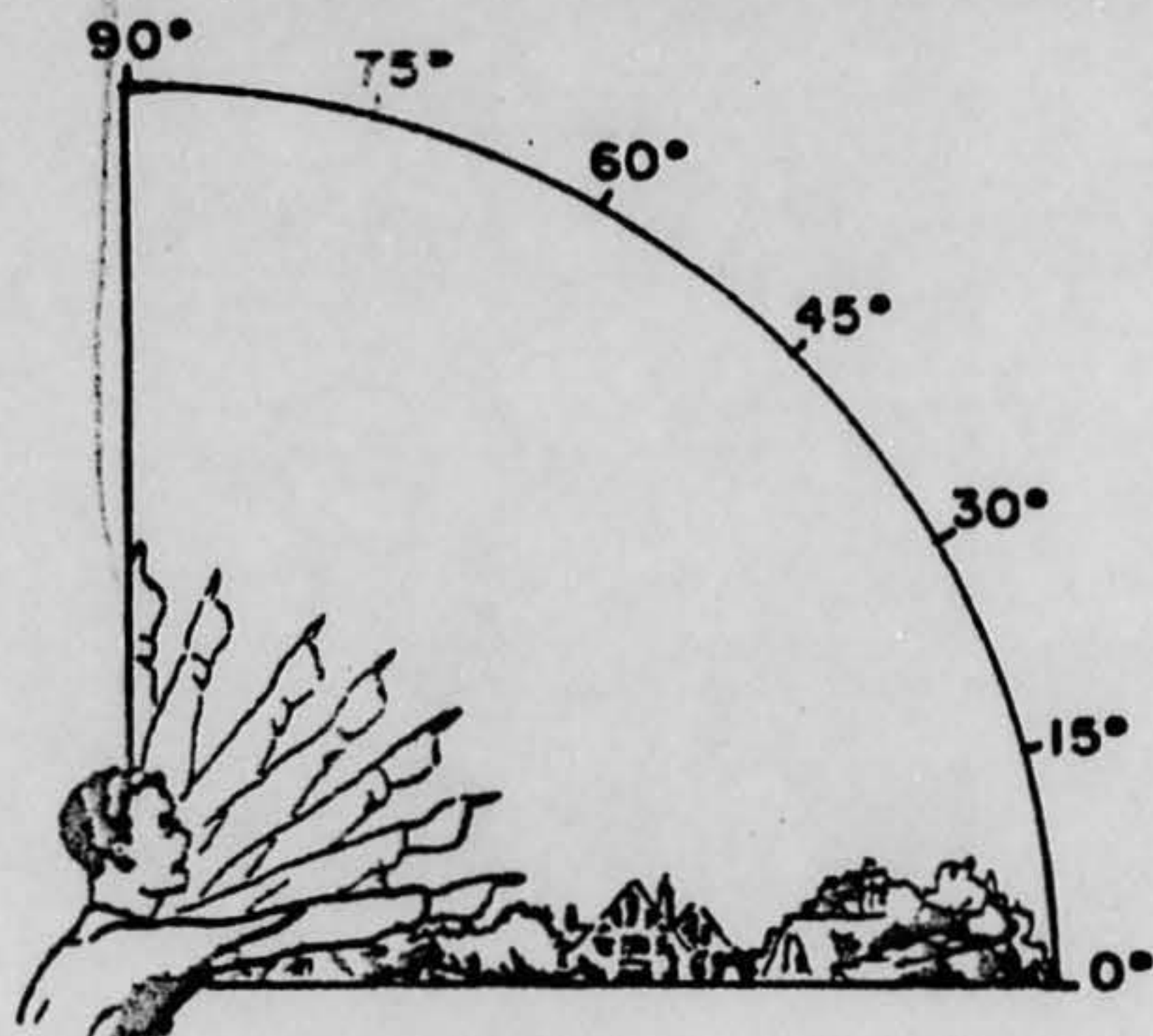
- |                 |     |                                     |                |     |                                     |
|-----------------|-----|-------------------------------------|----------------|-----|-------------------------------------|
| a. Eyeglasses   | Yes | <input checked="" type="radio"/> 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.

Large silver doughnut



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



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



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





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

*No*

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

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

31.2 Please list their names and addresses:

*Mr.* [Redacted] *Columbus*  
*Age 12 (C.S. [Redacted])*  
*Age 11*  
*1725 South 6th St. Columbus*

32. Please give the following information about yourself:

NAME [Redacted] [Redacted] [Redacted]  
 Last Name First Name Middle Name  
 ADDRESS [Redacted] Grove City Ohio  
 Street City Zone State  
 TELEPHONE NUMBER [Redacted] AGE Adult SEX Male

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

*Dep Sheriff of Franklin county*

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

30 May 66 840th CP  
 Day Month Year



30 MAY 66 (EST)

1. WEATHER; CMH

30/2300Z	40①60②15	0109
31/0000Z	70②15	0107
31/0100Z	70①15	0405
31/0200Z	70①15	0704

2. WINDS; 31/0000Z

5m	3415
10m	3030
15m	2835
20m	2945
30m	2760
40m	2845
50m	2630



34. Date you completed this questionnaire:

30 May 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.

This object was discovered by [redacted] [redacted] when they [redacted] the end of a transport line (somewhat like fishing line and about as thick as a [redacted] match). They proceeded to follow this line, while winding it around a stake, when they found it attached to the [redacted] shaped object. When they tried to pull it to earth the line broke, but the object did not change position. This suggested the possibility of other mooring lines, but none were found. The Dep. Sheriff making this report stayed at the location until almost dark and then had to leave — [redacted] Sullivan was notified of the above incident.

Capt Hansen  
640407



COMMENTS OF PREPARING OFFICIAL:

Military and Civil Aircraft were in the area on the date/time given. However, the description does not match any known balloons or blimps in the area at that time either. No definite conclusion can be reached by this office.

*James D. Ballsmith.*  
JAMES D. BALLSMITH  
Capt., USAF



Columbus, Ohio

30 May 66

J. J. J. Date.

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

[REDACTED]  
Grove City, Ohio

Dear [REDACTED]

Reference your unidentified observation of 30 May 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 QUINTEANILLA, Jr, Major, USAF  
Chief, Project Blue Book



PROJECT 10073 RECORD

1. DATE - TIME GROUP 30 May 66 31/0500Z	2. LOCATION Columbus, Ohio Multiple
3. SOURCE Civilian	10. CONCLUSION Aircraft (Possible) <i>Jet</i> 6 Witnesses.
4. NUMBER OF OBJECTS Five	
5. LENGTH OF OBSERVATION 5-10 minutes	11. BRIEF SUMMARY AND ANALYSIS Observers noted round solid objects traveling toward the SSW. The objects were white in color and no sound was heard at anytime. <i>Hole in middle - - .</i>
6. TYPE OF OBSERVATION Ground Visual	
7. COURSE SSW	Aircraft were in the immediate area at the time which could have been responsible for the sighting.
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	



COLUMBUS, OHIO 5 MAY 66 06/0130Z

3 May 66  
COLUMBUS, Ohio

FTD (TDEW)  
Wright-Patterson AFB, Ohio 45433  
15 June 1966


~~██████████~~  
~~██████████~~ t  
Columbus, Ohio 44223

Dear Mr. ~~██████████~~

Reference your unidentified observation of 5 May 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



## 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;"> <span style="margin-right: 40px;"><u>30</u> Day</span> <span style="margin-right: 40px;"><u>MAY</u> Month</span> <span><u>66</u> Year</span> </p>	<p>2. Time of day: <u>12</u> . <u>00</u> Hour Minutes</p> <p>(Circle One): A.M. or <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">P.M.</span></p> <p style="text-align: center;"><u>Day</u> —</p>		
<p>3. Time Zone:</p> <p>(Circle One): <span style="margin-right: 100px;"><input checked="" type="radio"/> a. Eastern</span> <span><input type="radio"/> a. Daylight Saving</span>  <span style="margin-right: 100px;"><input type="radio"/> b. Central</span> <span><input type="radio"/> b. Standard</span>  <span style="margin-right: 100px;"><input type="radio"/> c. Mountain</span>  <span style="margin-right: 100px;"><input type="radio"/> d. Pacific</span>  <span style="margin-right: 100px;"><input type="radio"/> e. Other _____</span></p>			
<p>4. Where were you when you saw the object?</p> <p><u>LANE AVE + RT 33</u> <span style="float: right; font-size: 2em;">5</span></p> <p style="text-align: center;"> <span style="margin-right: 200px;">Nearest Postal Address</span> <span style="margin-right: 100px;">City or Town</span> <span>State or County</span> </p>			
<p>5. How long was object in sight? (Total Duration) <u>    </u> <u>5 TO 10</u> <u>    </u> Hours Minutes Seconds</p> <p>a. Certain <span style="margin-left: 150px;">c. Not very sure</span>  b. Fairly certain <span style="margin-left: 150px;">d. Just a guess</span></p> <p>5.1 How was time in sight determined? <u>GUESS</u></p> <p>5.2 Was object in sight continuously? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>			
<p>6. What was the condition of the sky?</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <p style="text-align: center;">DAY</p> <p>a. Bright <input checked="" type="radio"/> b. Cloudy</p> </td> <td style="width: 50%; vertical-align: top;"> <p style="text-align: center;">NIGHT</p> <p>a. Bright b. Cloudy</p> </td> </tr> </table>		<p style="text-align: center;">DAY</p> <p>a. Bright <input checked="" type="radio"/> b. Cloudy</p>	<p style="text-align: center;">NIGHT</p> <p>a. Bright b. Cloudy</p>
<p style="text-align: center;">DAY</p> <p>a. Bright <input checked="" type="radio"/> b. Cloudy</p>	<p style="text-align: center;">NIGHT</p> <p>a. Bright 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 <span style="margin-left: 100px;">d. To your left</span>  b. In back of you <span style="margin-left: 100px;">e. Overhead</span>  c. To your right <span style="margin-left: 100px;"><input checked="" type="radio"/> f. Don't remember</span></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

c. Other ROUND

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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?

NONE

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: CLOUD

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:

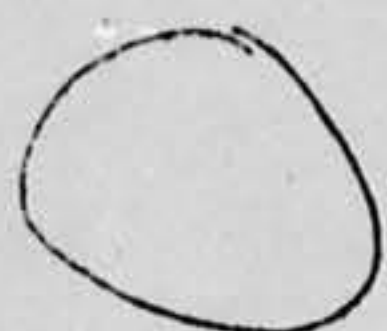
a. Sound NONE

b. Color WHITE

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?

VERY LITTLE

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 WITH A HOLE  
IN THE MIDDLE



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 EDGE OF UPTER ALLUATION

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

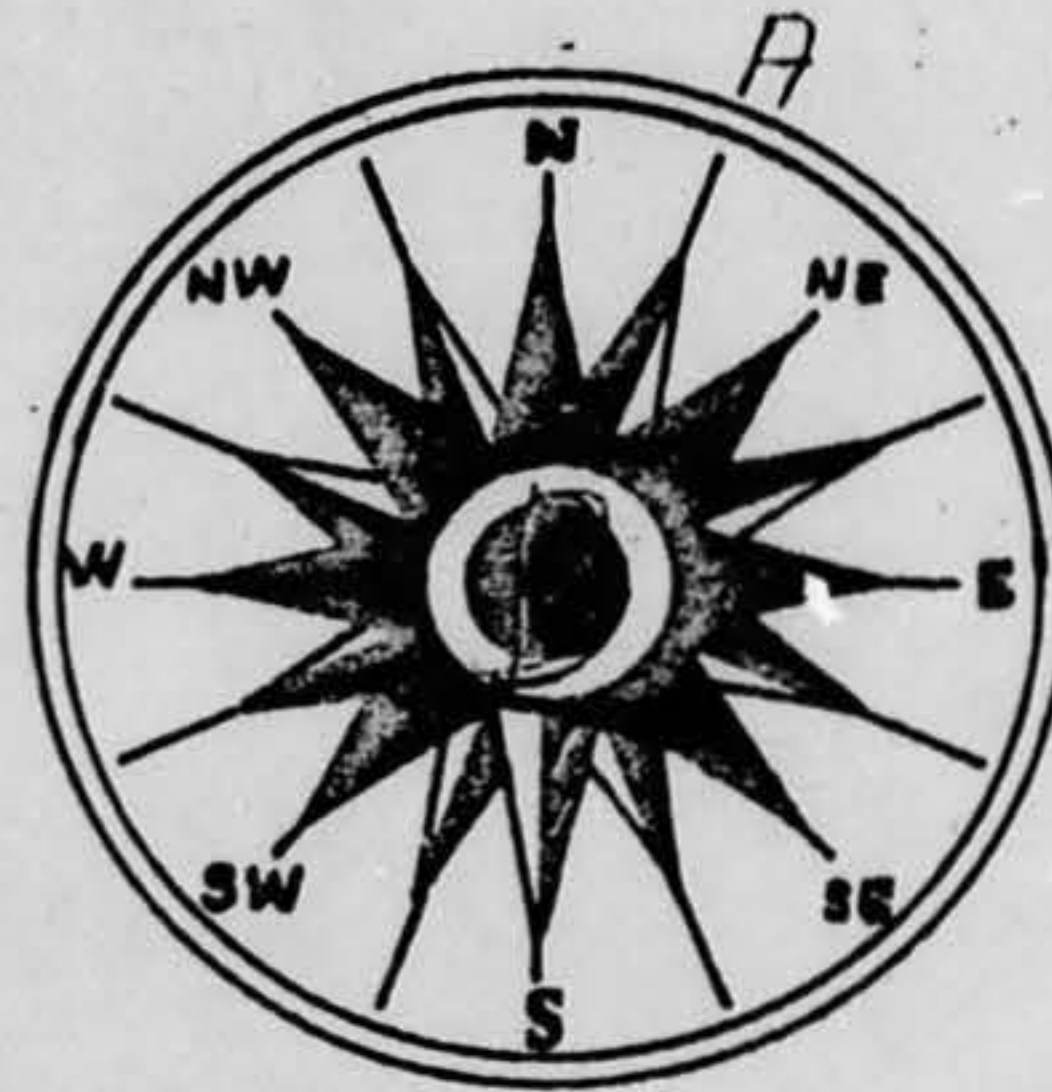
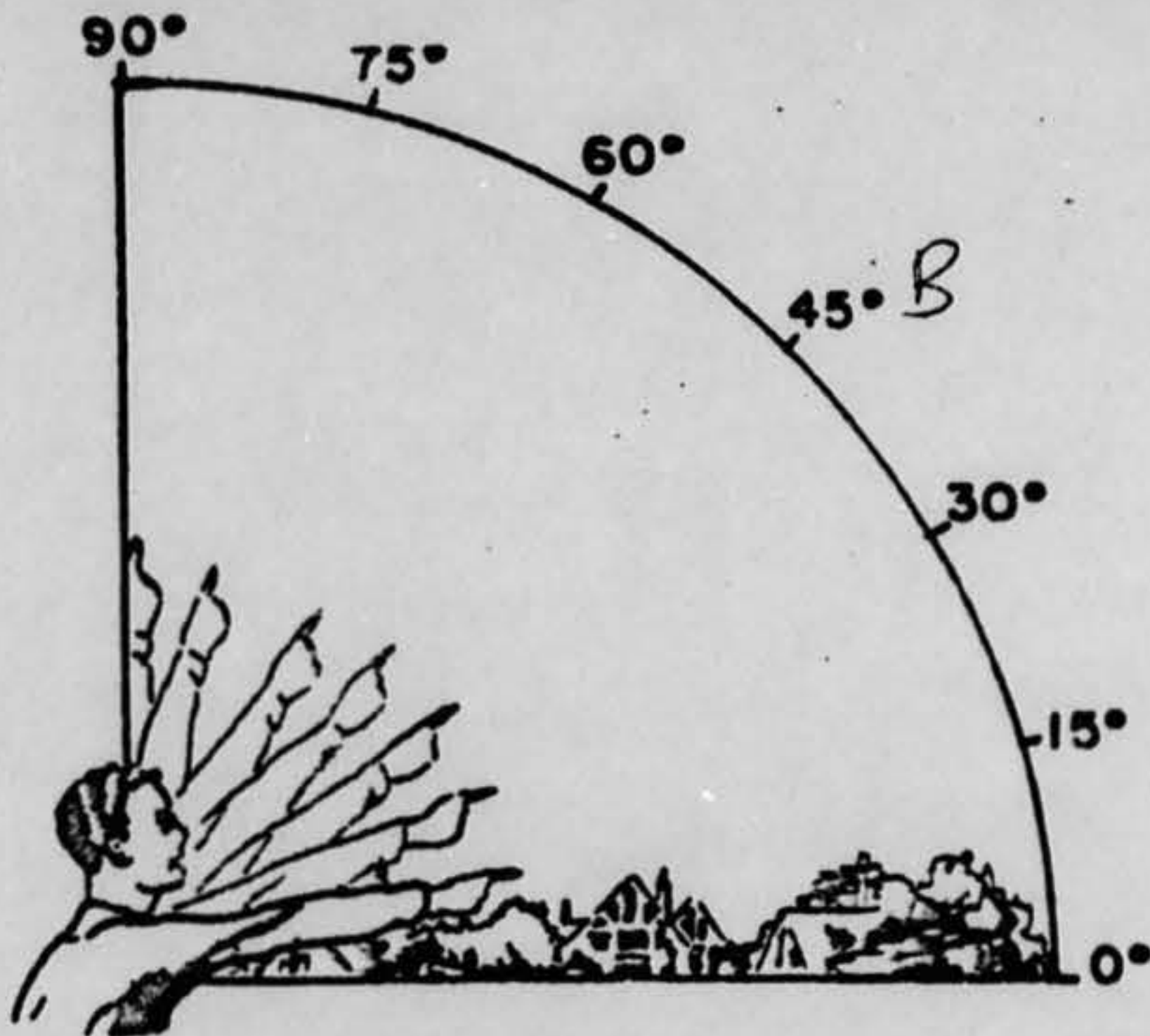
25. Did you observe the object through any of the following?

- |                 |                           |                                     |                |                           |                                     |
|-----------------|---------------------------|-------------------------------------|----------------|---------------------------|-------------------------------------|
| 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? 5  
 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

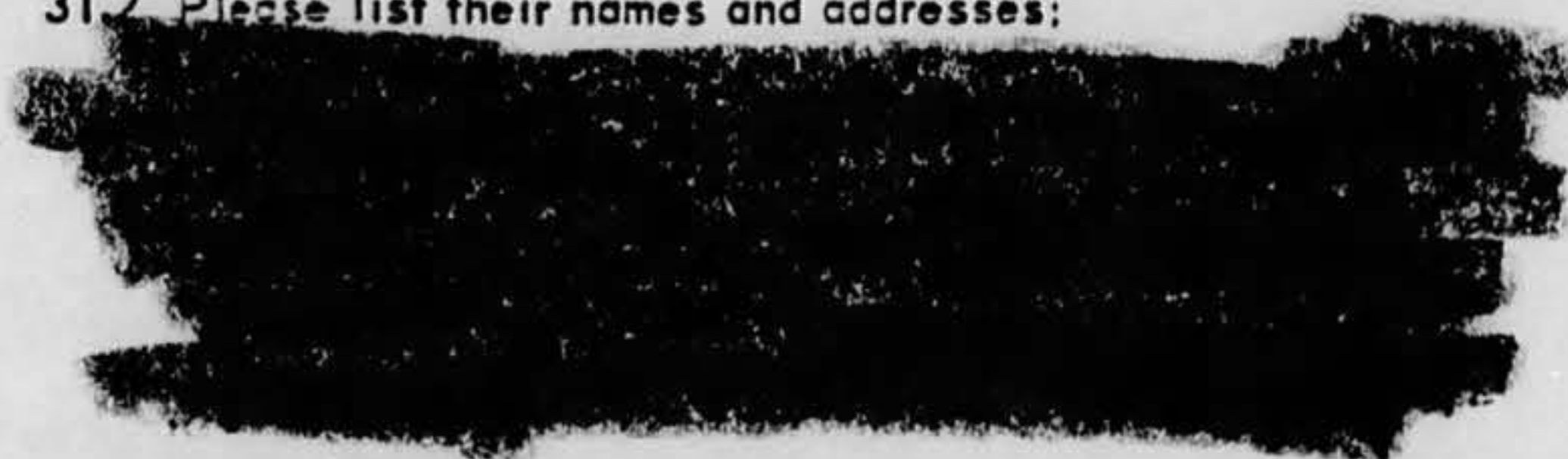
No

31.1 IF you answered YES, did they see the object too? (Circle One)

Yes

No

31.2 Please list their names and addresses:

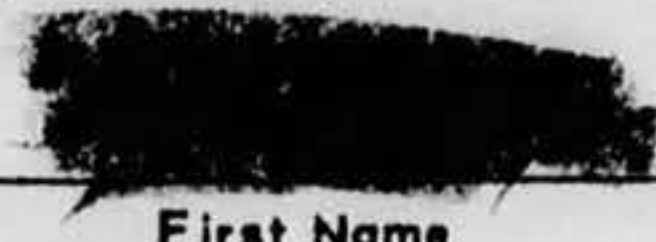


32. Please give the following information about yourself:

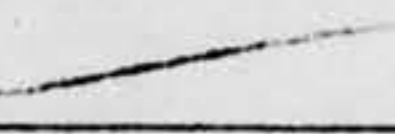
NAME



Last Name



First Name



Middle Name

ADDRESS



Street

COLUMBUS

City

?

Zone

OHIO

State

TELEPHONE NUMBER



AGE

ADULT

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?

30

Day

MAY

Month

66

Year



34. Date you completed this questionnaire:

<u>30</u>	<u>MAY</u>	<u>66</u>
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.

1. WEATHER ; CMH

2200 E	80 @ 15 0000
2300 E	80 @ 15 0000
31 / 0000 E	80 @ 15 0000
0100 E	80 @ 15 0507

2. WINDS ; 30 / 1900 EST

5 m	34 15
10 m	30 30
15 m	28 35
20 m	29 45
30 m	27 60
40 m	28 45
50 m	26 30



COMMENTS OF PREPARING OFFICIAL:

Civil Aircraft were arriving and departing Port Columbus Airport on the dates/times indicated. Descriptions and directions of sightings tie in with Civil Aircraft approaching Port Columbus.

*James D. Ballsmith*  
JAMES D. BALLSMITH  
Capt., USAF



COLUMBUS, OHIO 5 MAY 66 06/0130Z

3 May 66  
COLUMBUS, Ohio

FTD (TDEW)  
Wright-Patterson AFB, Ohio 45433  
15 June 1966


~~██████████~~  
~~██████████~~ t  
Columbus, Ohio 44223

Dear Mr. ~~██████████~~

Reference your unidentified observation of 5 May 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



**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>5</u>      <u>MAY</u>      <u>66</u>              Day      Month      Year         </p>	<p>2. Time of day: <u>2030</u>      _____              Hour      Minutes</p> <p>(Circle One): <u>2055</u>      A.M.      or      P.M.</p>		
<p>3. Time Zone: (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 align="right">(Circle One): <input type="radio"/> a. Daylight Saving  <input checked="" type="radio"/> b. Standard</p>			
<p>4. Where were you when you saw the object? FOOT BALL STADIUM</p> <p align="center">             _____      <u>COLUMBUS</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>2-4</u> _____              Hours      Minutes      Seconds</p> <p>a. Certain      <input checked="" type="radio"/> 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 _____ No <input checked="" type="checkbox"/> <u>FADING OUT</u>  <span style="margin-left: 100px;"><u>IF APPLICABLE</u></span></p>			
<p>6. What was the condition of the sky?</p> <table style="width:100%;"> <tr> <td style="width:50%;">                 DAY                  a. Bright                  b. Cloudy             </td> <td style="width:50%;">                 NIGHT                  a. Bright                  b. Cloudy             </td> </tr> </table>		DAY a. Bright b. Cloudy	NIGHT a. Bright b. Cloudy
DAY a. Bright b. Cloudy	NIGHT a. Bright b. Cloudy		
<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>			

*(Send 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
- d. Don't know

11.1 Compare brightness to some common object:

2 TIMES AS BRIGHT AS JUPITER

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



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

yes      Faded      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 \_\_\_\_\_

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?

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

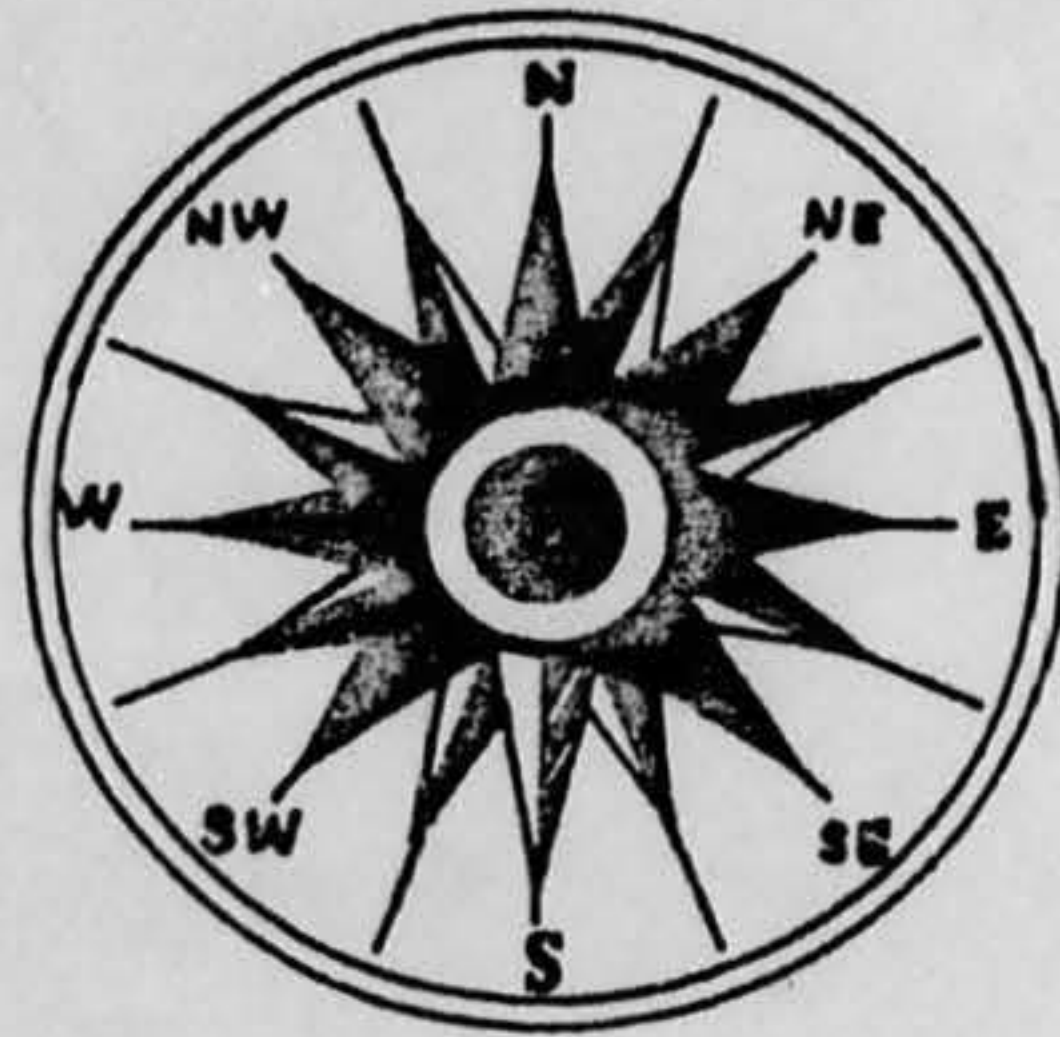
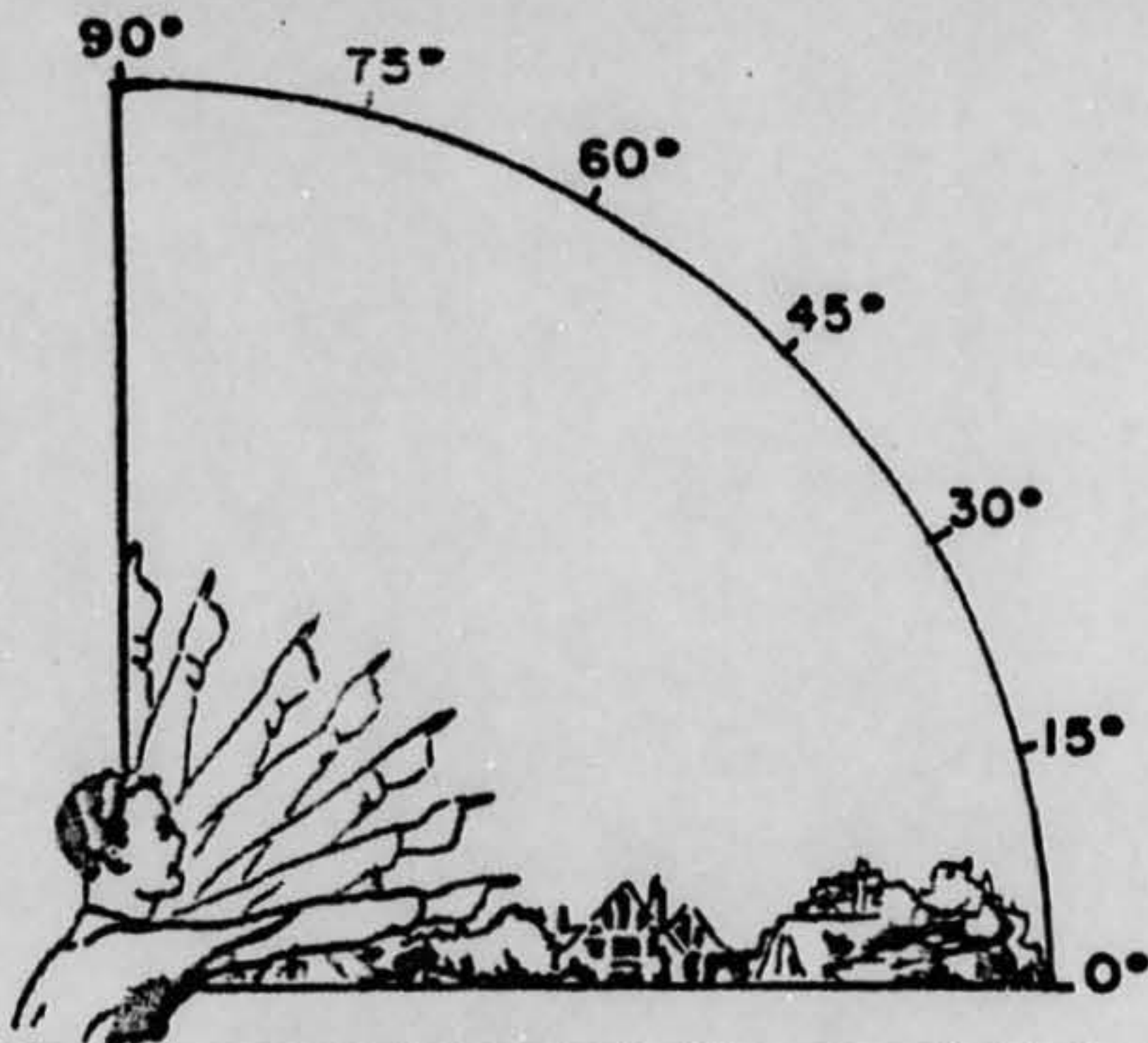
25. Did you observe the object through any of the following?

- |                 |     |    |                |     |    |
|-----------------|-----|----|----------------|-----|----|
| 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.











*Loobboorn*

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.



## COMMENT:

NO AIRCRAFT REPORTED IN AREA + NO ~~RA~~ RADAR RETURN -  
MOST LIKELY REFLECTION OF JUPITER OR SOME OTHER  
BRIGHT RETURN



5 MAY 1966

WEATHER; CMH  
05/1400E CLEAR 10 27176-73  
05/2000E CLEAR 10 2108  
05/2100E CLEAR 12 1908  
05/2200E 120015 2008

WINDS; 5 MAY 1900 EST

5m	2540
10m	2845
15m	2950
20m	3045
30m	2935
40m	2755
50m	2860



PROJECT 10073 RECORD

1. DATE - TIME GROUP 5 May 66 6/0330Z	2. LOCATION Columbus, Ohio (3 Witnesses)
3. SOURCE Civilian	10. CONCLUSION Aircraft (possible) <u>          </u> <i>Poor data JHA</i>
4. NUMBER OF OBJECTS One	
5. LENGTH OF OBSERVATION 5 minutes	11. BRIEF SUMMARY AND ANALYSIS  Witnesses observed object that appeared as a light that was brighter than the brightest star. The object moved behind a bank of clouds and disappeared from view. The object was round in shape and white in color. It looked like a landing gear on an aircraft stated one witness.  The information present indicates that an aircraft was possibly responsible for the sighting.
6. TYPE OF OBSERVATION Ground Visual	
7. COURSE Circle overhead	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	



~~True~~ Tech Data  
Need

(A/C)

### 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?

5 MAY 1966  
Day Month Year

2. Time of day: 2230 1  
Hour Minutes

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

AL1733 @ 81

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

COLUMBUS 12  
City or Town

OHIO  
State or County

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

Hours 5 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?

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  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

c. 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?

WENT BEHIND A BANK OF LOW CLOUDS

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: A CLOUD AND DISAPPEARED

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:

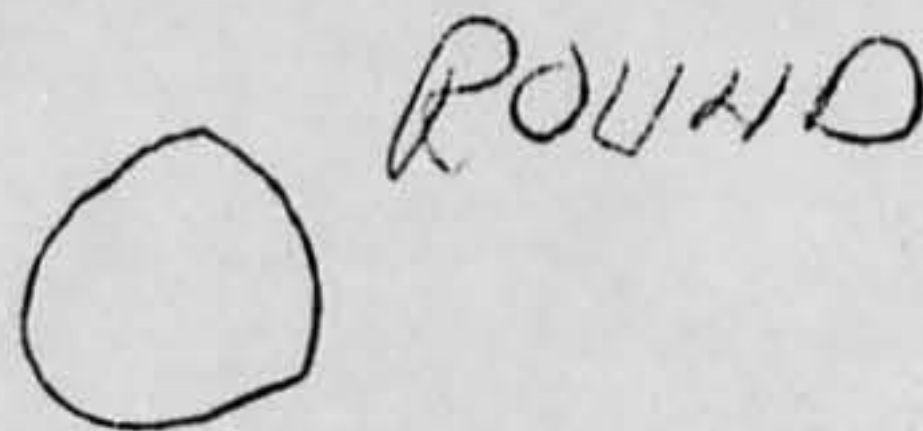
a. Sound NONE

b. Color WHITE

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?

$\frac{1}{2}$

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? 90 KNOTS

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? 1 1/2 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? \_\_\_\_\_ 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?

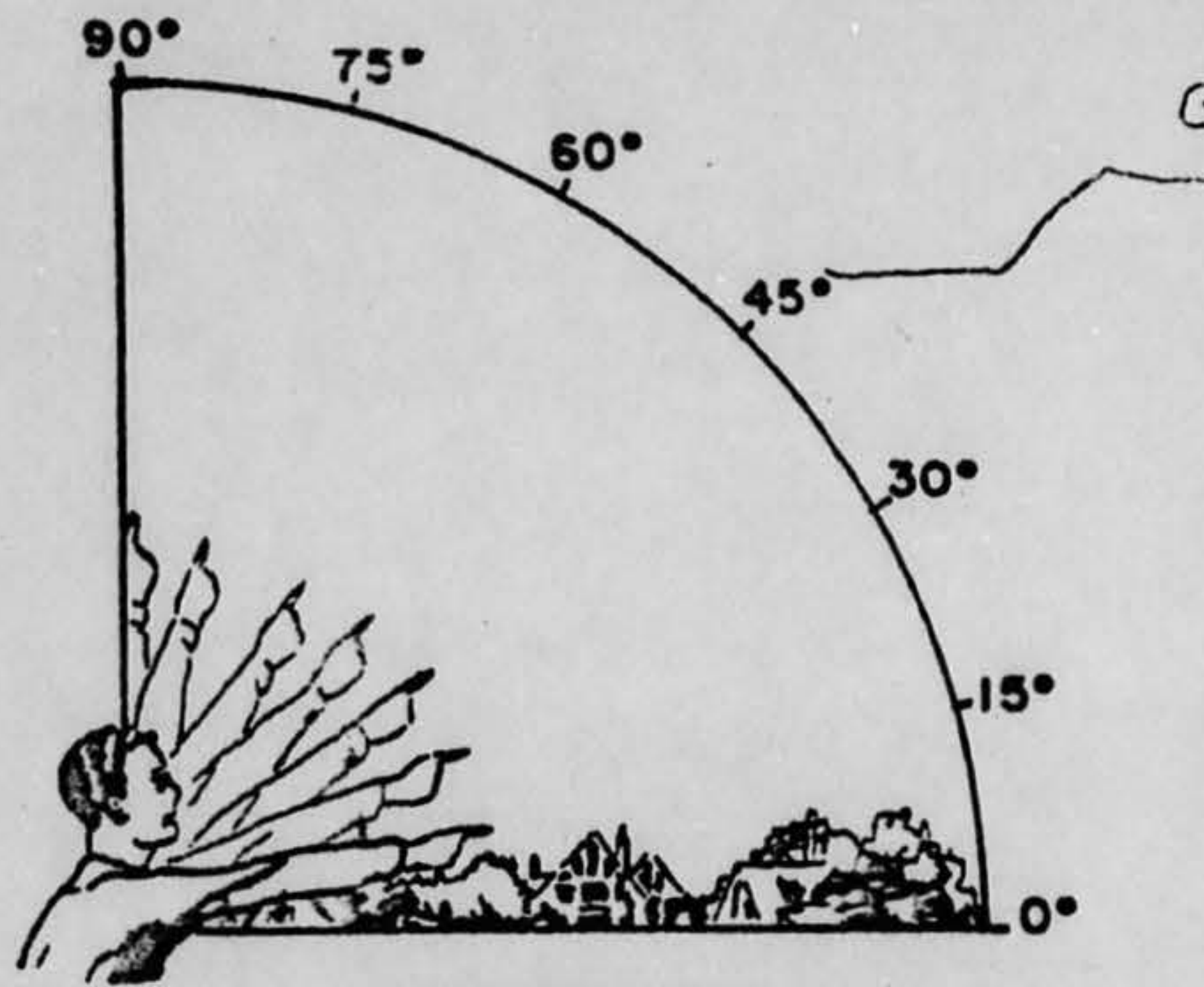
- |                 |     |                                     |               |       |                                     |
|-----------------|-----|-------------------------------------|---------------|-------|-------------------------------------|
| a. Eyeglasses   | Yes | <input checked="" type="radio"/> 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.

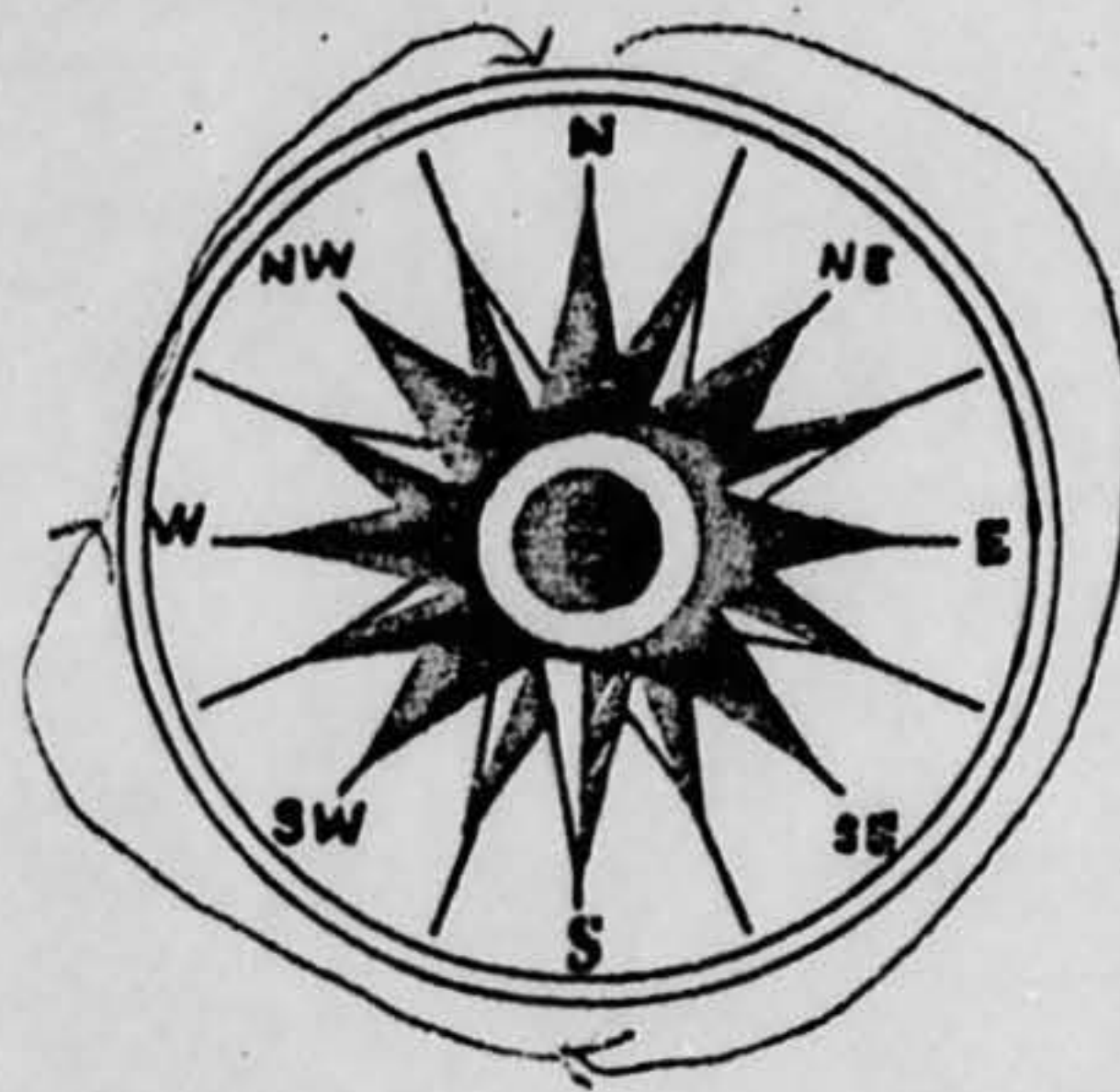
LANDING GEAR LIGHT ON A ACFT



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.



CIRCLE FROM N. TO S. THEN CIRCLED  
W. E. S. N.



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  
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.

NONE

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:

WIFE [REDACTED]  
BROTHER IN LAW [REDACTED]  
[REDACTED]  
COLUMBIAS 0410

32. Please give the following information about yourself:

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

ADDRESS [REDACTED] AVE COLUMBIAS 12 JH0  
Street City Zone State

TELEPHONE NUMBER [REDACTED] AGE 49 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?

5 MAY 66  
Day Month Year  
317TH CP



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 the Moon

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)

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



COMMENT:

APPEARS TO BE MOON WITH CLOUD MOVING IN FRONT  
OF IT.



5 MAY 1966

WEATHER; CMH 05/2100E CLEAR 12 1908  
05/2200E 120 @ 15 2208  
05/2300E CLEAR 15 2010  
06/0000E CLEAR 15 2214 @ 20

WINDS; 5 MAY 1900 EST

5 m	25/40
10 m	28/45
15 m	29/50
20 m	30/45
30 m	29/35
40 m	27/55
50 m	28/60



PROJECT 10073 RECORD

1. DATE - TIME GROUP 6 May 1966 07/0315Z	2. LOCATION Columbus, Ohio (2 Witnesses)
3. SOURCE Civilian	10. CONCLUSION Possible (AIRCRAFT) ✓ <i>jet</i>
4. NUMBER OF OBJECTS One	There were a/c in the area and no unusual radar returns. There is no information in the report to indicate object could NOT have been an a/c observati
5. LENGTH OF OBSERVATION 3 - 5 Minutes	11. BRIEF SUMMARY AND ANALYSIS Observer noted red & white lights approaching from the NE. The lights maintained their relative position as if connected to something but that something was never seen.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE NE to SW	
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.

<p>1. When did you see the object?</p> <p><u>06</u> <u>May</u> <u>66</u>  Day Month Year</p>	<p>2. Time of day: <u>07/0315</u>  Hour Minutes</p> <p>(Circle One): A.M. or P.M.</p>
<p>3. Time Zone: (Circle One): a. Eastern b. Central c. Mountain d. Pacific e. Other <u>ZUL4</u></p> <p>(Circle One): a. Daylight Saving b. Standard</p>	
<p>4. Where were you when you saw the object?</p> <p><u>Terrace Ave and Wicklow</u> <u>Columbus</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>—</u> <u>3/05</u> <u>—</u>  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? Yes <u>X</u> No <u>—</u></p>	
<p>6. What was the condition of the sky?</p> <p>DAY NIGHT  a. Bright 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 b. In back of you c. To your right d. To your left e. Overhead 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 S
- 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:

*about the same as lights on Aircraft but brighter*

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

*could not see only on light*

*Other*

---



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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?                            | <input checked="" type="radio"/> Yes | 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?

went 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 none  
b. Color Red & white 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?

very small amount

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.

Red & white  
oo 3 lights

Red and white  
oo 4 lights

the lights maintained their relative positions as if connected to something, but that something couldn't be seen



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?

Very slow

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? 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?

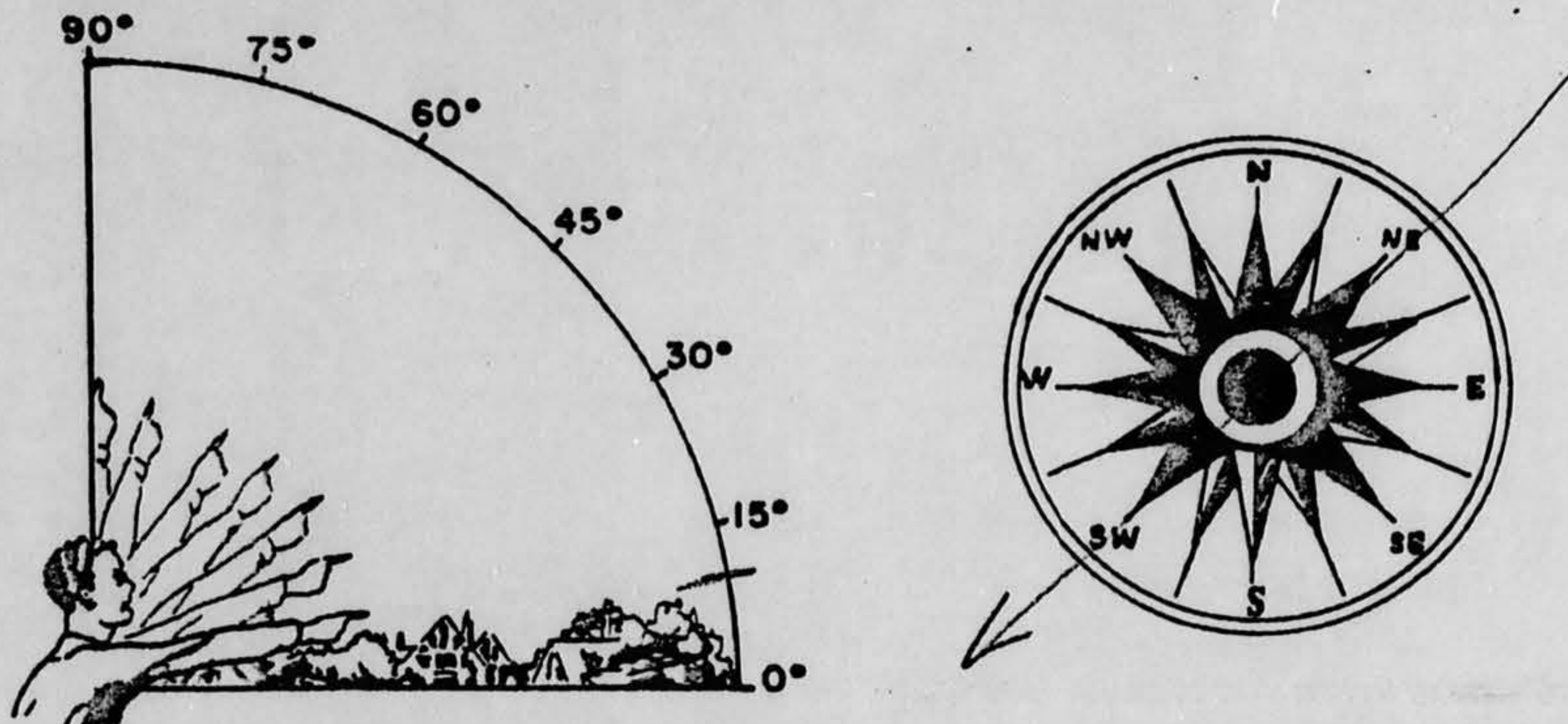
- |  |     |    |               |                  |    |
|--|-----|----|---------------|------------------|----|
| a. Eyeglasses                                  | Yes | No | e. Binoculars | Yes              | No |
| b. Sun glasses                                 | Yes | No | f. Telescope  | Yes   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

NO



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.

*see compass rose*

29. IF there was MORE THAN ONE object, then how many were there? NO  
 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] Drive  
Hilliard, Ohio  
[Redacted]

32. Please give the following information about yourself:

NAME [Redacted] [Redacted] [Redacted]  
Last Name First Name Middle Name  
ADDRESS [Redacted] Ave Columbus Ohio  
Street City Zone State  
TELEPHONE NUMBER [Redacted] AGE Adult 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?

06 May 66 Command Post  
Day Month Year



34. Date you completed this questionnaire:

06      May      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.

*none*



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.



COMMENT:

SOME AIRCRAFT REPORTED IN AREA AND NO  
OTHER RADAR RETURNS.



6 MAY 1966

WEATHER: CMH 07/0200Z CLEAR 15 3112  
07/0300Z CLEAR 15 3310  
07/0400Z CLEAR 15 3605  
07/0500Z CLEAR 15 1006

WINDS: 6 MAY 1900 EST

5M	3120
10M	3035
15M	3050
20M	2850
30M	2970
40M	2580
50M	2860



PROJECT 10073 RECORD

<b>1. DATE - TIME GROUP</b> 7 May 1966 07/0540Z	<b>2. LOCATION</b> Columbus, Ohio (Witness)
<b>3. SOURCE</b> Civilian	<b>10. CONCLUSION</b> Astro (ALTAIR) ✓ <i>MA</i> <i>Poor report</i>
<b>4. NUMBER OF OBJECTS</b> One	ALTAIR was at 100 deg azimuth, 23 deg elevation and rising at time of sighting.
<b>5. LENGTH OF OBSERVATION</b> 2 Minutes	<b>11. BRIEF SUMMARY AND ANALYSIS</b> Object was orange and red star like that did not move. Observer looked at object and seen it did not move or disappear, so went on.
<b>6. TYPE OF OBSERVATION</b> Ground-Visual	
<b>7. COURSE</b> Easterly	
<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	



COLUMBUS, O

7 May 66

ASTRO (S/P)

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?

7 May 66  
Day Month Year

2. Time of day: 07/0540Z 0040  
Hour Minutes

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

3. Time Zone:

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

- (Circle One): a. Daylight Saving<sup>+</sup>
- b. Standard

4. Where were you when you saw the object?

~~████████████████████~~

Columbus

Ohio

Nearest Postal Address

City or Town

State or County

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

— 2 —  
Hours Minutes Seconds

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

5.1 How was time in sight determined? guess

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

N/A

ALTAIR @ 100° AZ  
23° ELEVATION



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

b. Color orange & 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?

cover it completely

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?

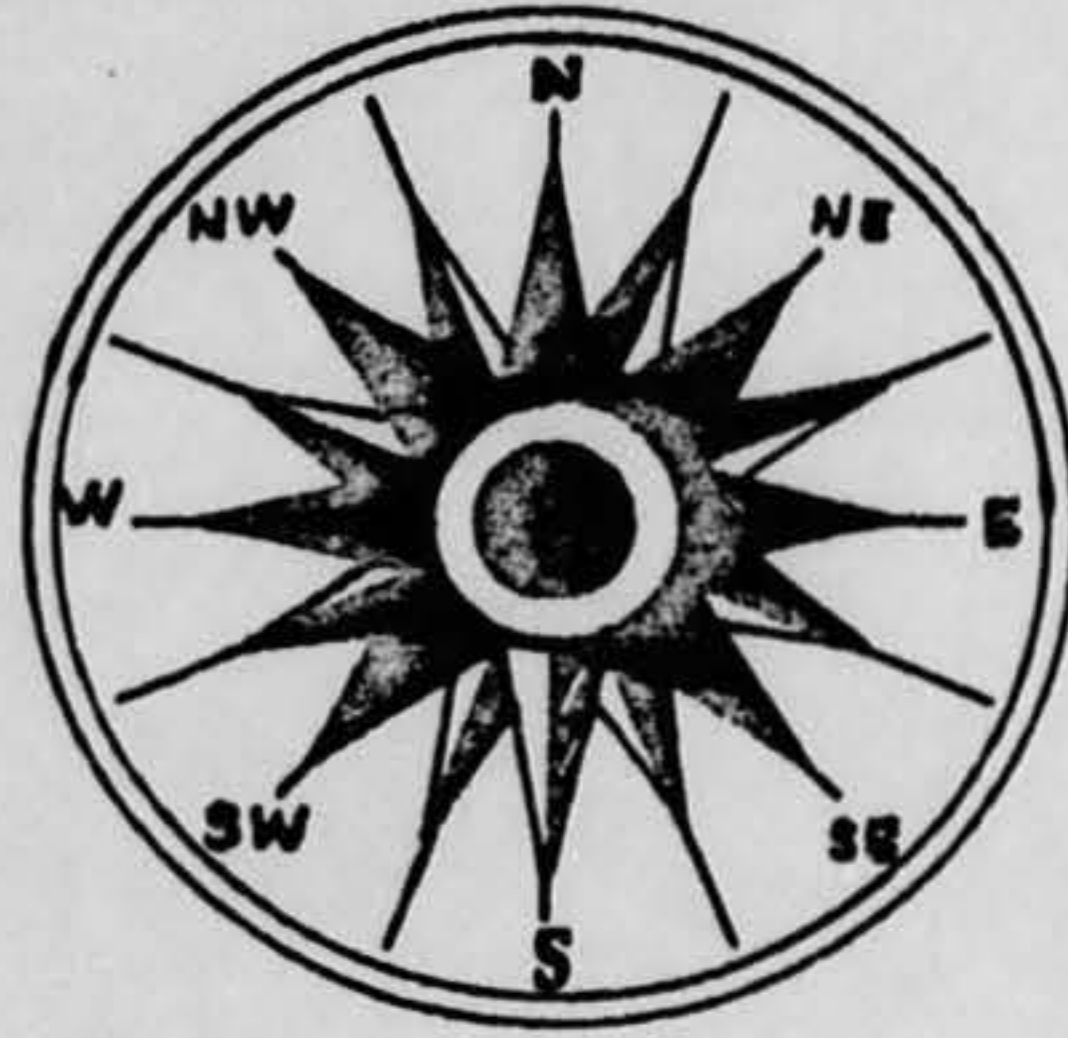
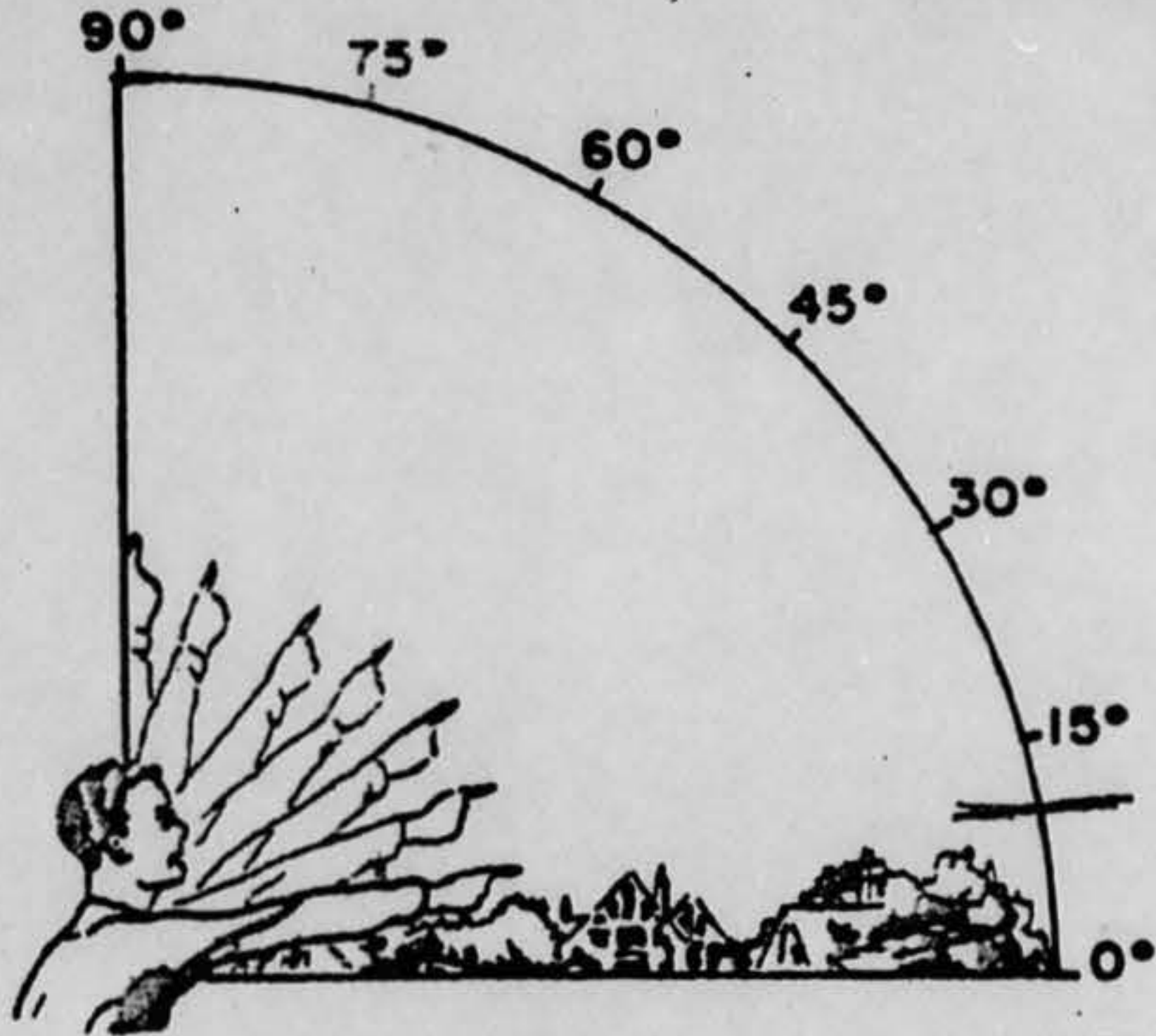
- |  |     |    |               |           |    |
|--|-----|----|---------------|-----------|----|
| <input checked="" type="radio"/> a. Eyeglasses | Yes | No | e. Binoculars | Yes       | No |
| b. Sun glasses                                 | Yes | No | f. Telescope  | Yes       | No |
| c. Windshield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

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.

Large 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.

*didn't move*

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*



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

*4 May 66 same 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:

*N/A*

32. Please give the following information about yourself:

NAME [Redacted] [Redacted] M. Miss.  
Last Name First Name Middle Name

ADDRESS [Redacted] Columbus Ohio  
Street City Zone State

TELEPHONE NUMBER [Redacted] AGE adult SEX F.

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?

7 MAY 66  
Day Month Year



34. Date you completed this questionnaire:

7      May      64  
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.

*None*



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)

- |                                    |                                    |                                    |                                    |
|------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| <input type="radio"/> a. North     | <input type="radio"/> c. East      | <input type="radio"/> e. South     | <input type="radio"/> g. West      |
| <input type="radio"/> b. Northeast | <input type="radio"/> d. Southeast | <input type="radio"/> f. Southwest | <input type="radio"/> 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?

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

*looked like the moon - only two objects*



COMMENT:

REFLECTION OF JUPITER WITH OTHER STARS -



7 MAY 1966

WEATHER: CMH 07/0400Z CLEAR 15 3605  
07/0500Z CLEAR 15 1006  
07/0600Z CLEAR 15 0907  
07/0700Z CLEAR 15 1806

WINDS: 6 MAY 1900 EST

5m	3120
10m	3035
15m	3050
20m	2850
30m	2970
40m	2580
50m	2860



PROJECT 10073 RECORD

<b>1. DATE - TIME GROUP</b> 7 May 1966 03/0140Z	<b>2. LOCATION</b> Columbus, Ohio (2 Witnesses)
<b>3. SOURCE</b> Civilian	<b>10. CONCLUSION</b> Astro (MOON) <i>Very likely. JH</i>
<b>4. NUMBER OF OBJECTS</b> One	MOON was at 136 deg azimuth, 15 deg elevation, approaching last
<b>5. LENGTH OF OBSERVATION</b> 2 Minutes	<b>11. BRIEF SUMMARY AND ANALYSIS</b> <i>quarter which is 12 May 66.</i>
<b>6. TYPE OF OBSERVATION</b> Ground-Visual	Observer noted object that was not as bright as a moon, that moved behind a cloud and disappeared. Object was a glowing yellow-white while in view. Since many clouds were present it appears movement was caused by clouds moving in front of moon.
<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	



(Prob Moon)

## 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?

7 May 66  
Day Month Year

2. Time of day: 2340

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?

416 N 5th  
Nearest Postal Address

Columbus  
City or Town

Ohio  
State or County

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

Hours

Minutes

Seconds

a. Certain

b. Fairly certain

 c. Not very sure

d. Just a guess

5.1 How was time in sight determined?

estimated

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:

Not Bright as Moon

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?           | <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 checked="" type="radio"/> 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 Moved quickly behind 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: cloud

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:

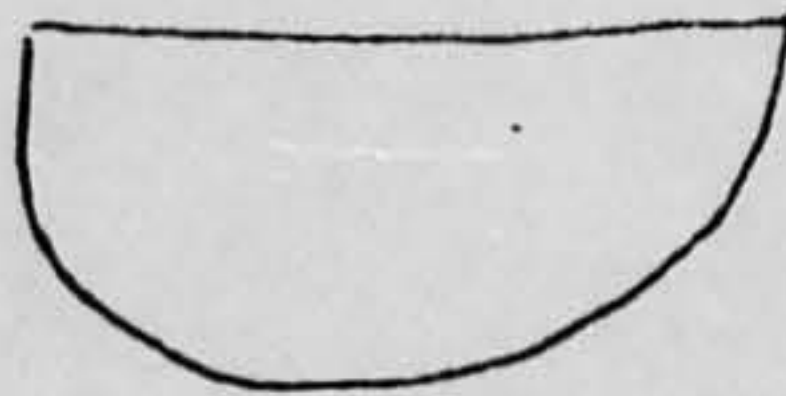
a. Sound None

b. Color glowing yellow-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?

Almost all

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? 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?  
 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

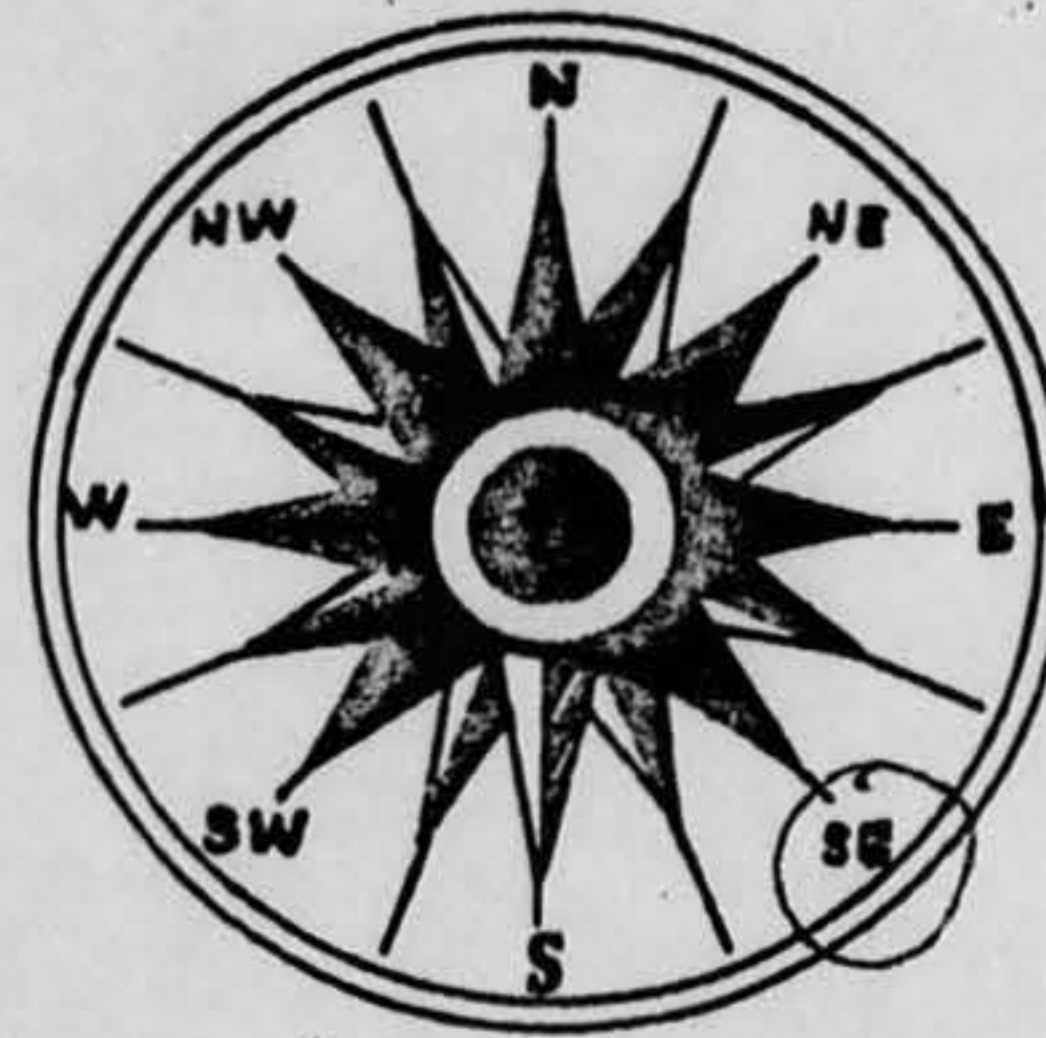
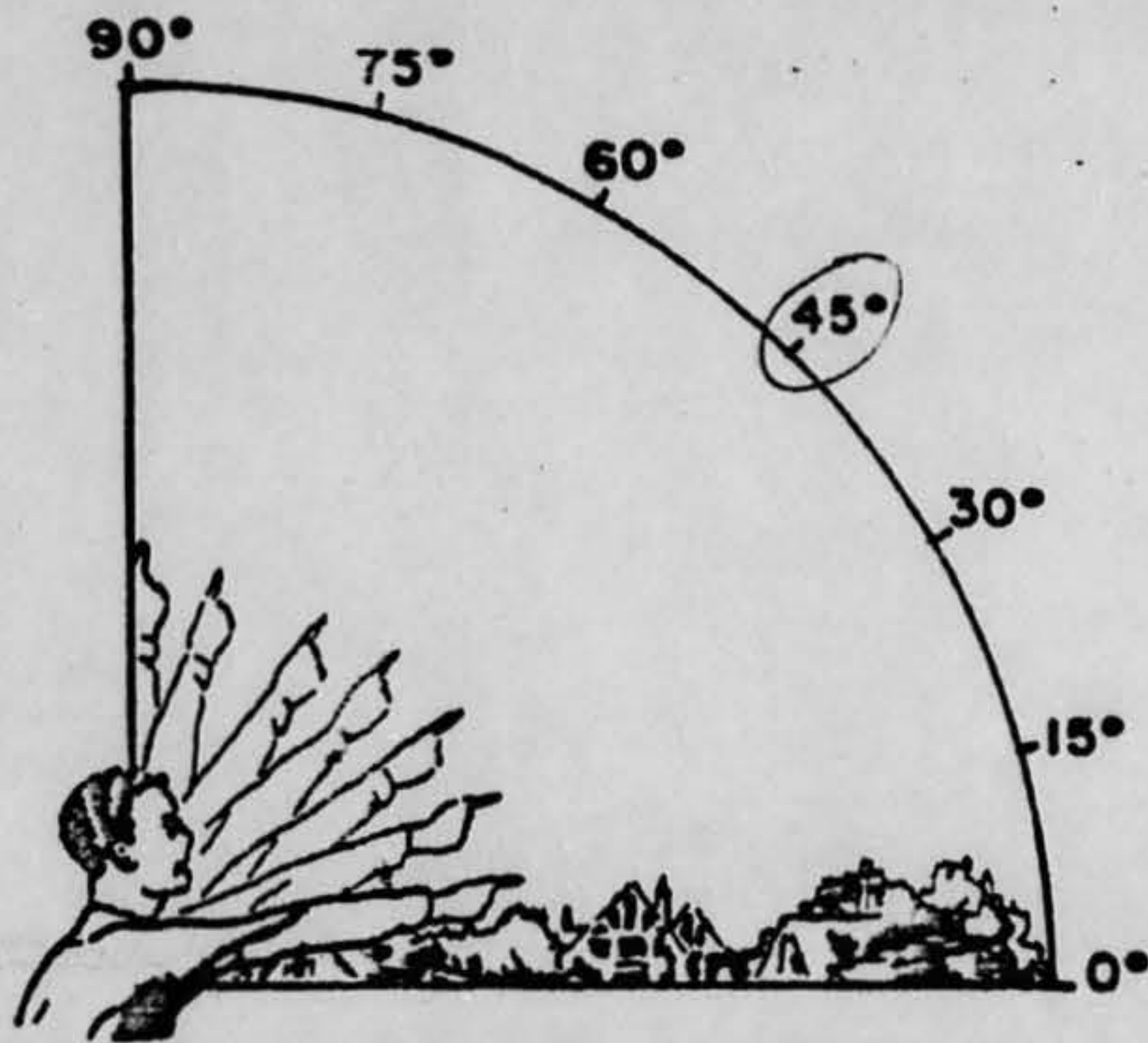
25. Did you observe the object through any of the following?

- |                 |                                  |    |               |       |    |
|-----------------|----------------------------------|----|---------------|-------|----|
| 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"/> | No | h. Other      | _____ |    |

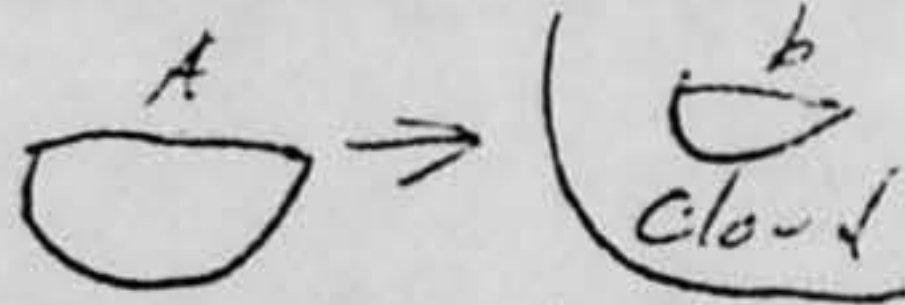
26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.



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:

[Redacted]  
[Redacted]  
[Redacted]  
Columbus

32. Please give the following information about yourself:

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

ADDRESS [Redacted] Columbus Ohio  
Street City Zone State

TELEPHONE NUMBER [Redacted] 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?

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



34. Date you completed this questionnaire:

\_\_\_\_\_ Day

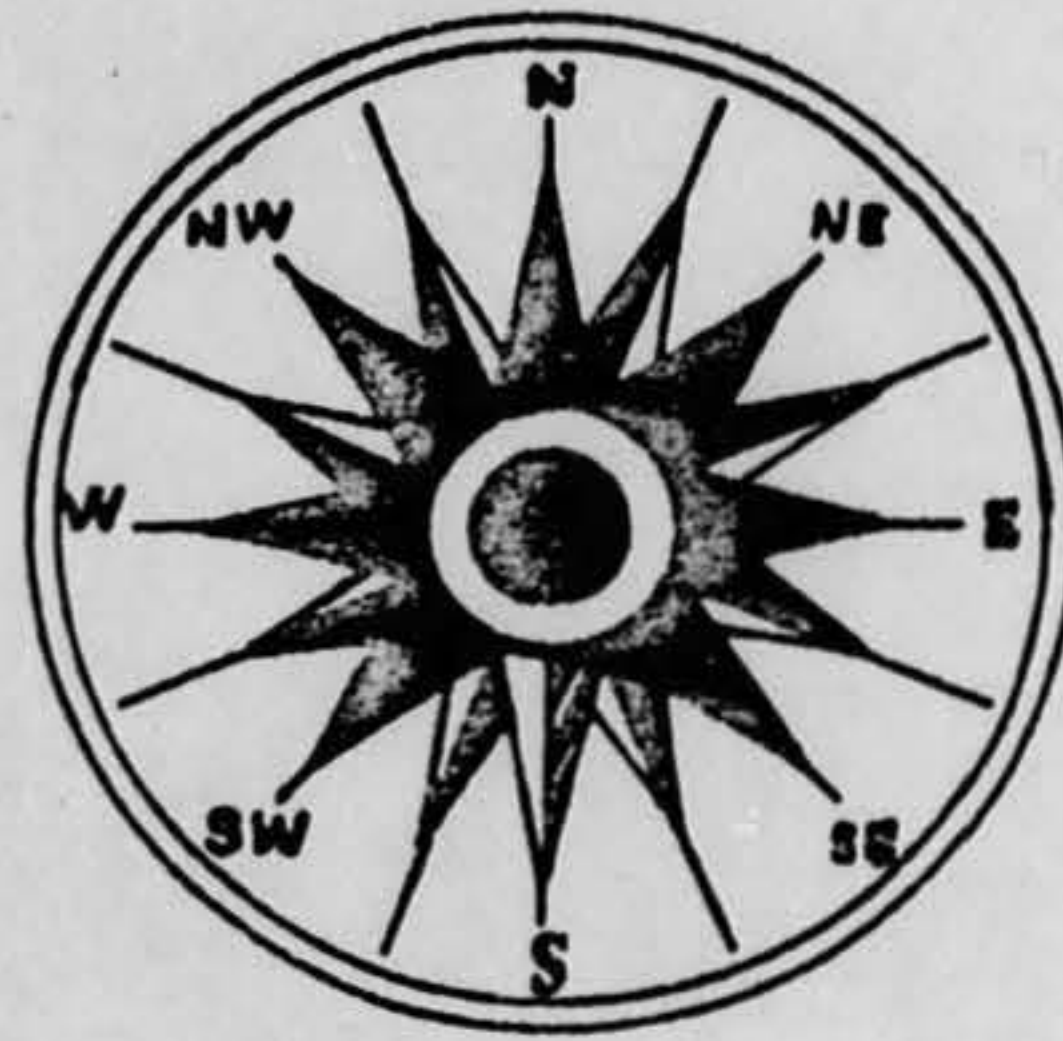
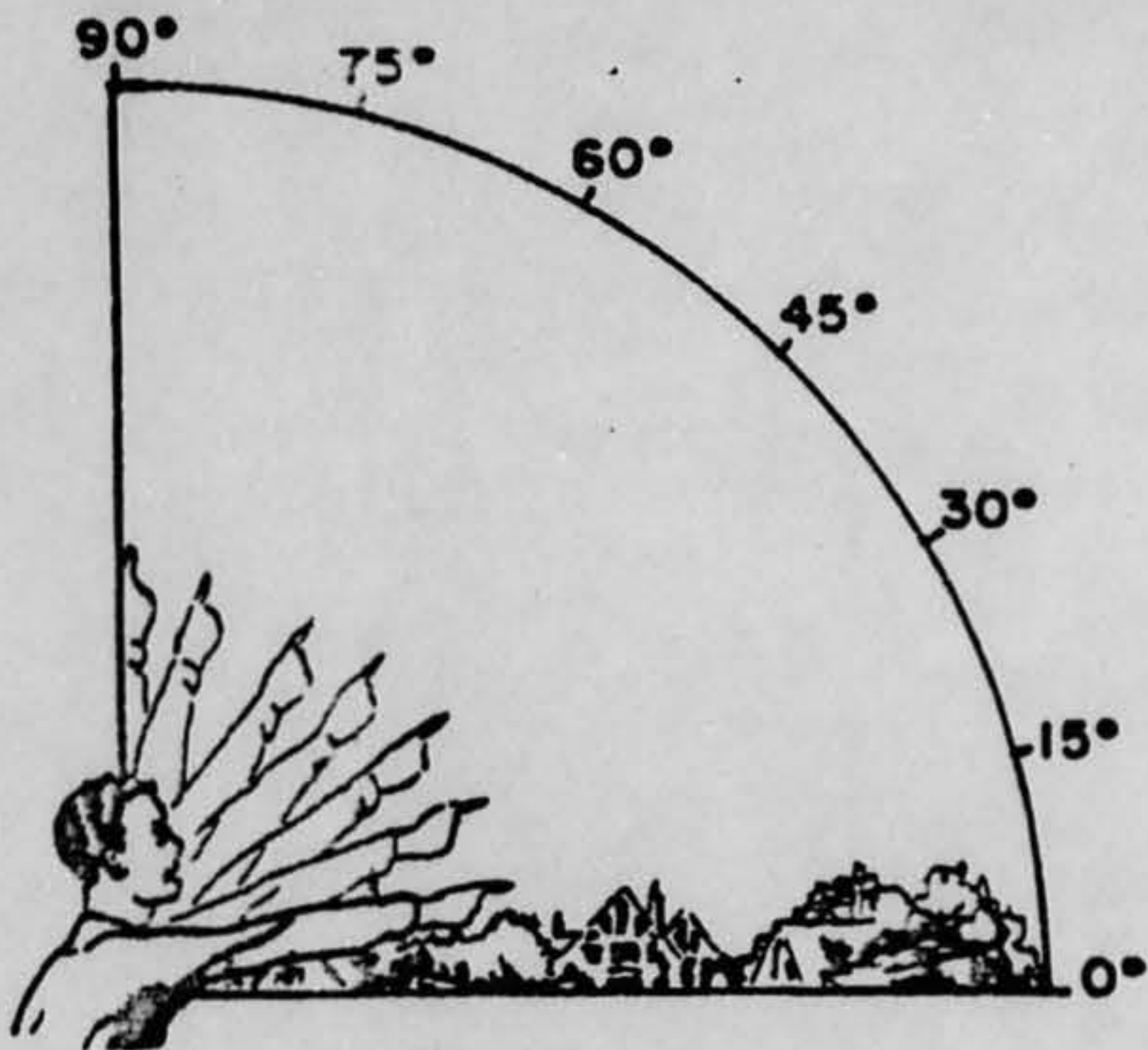
\_\_\_\_\_ Month

\_\_\_\_\_ 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.



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.



COMMENT,

PARTIAL MOON WITH CLOUDS MOVING IN FRONT,



7 MAY 1966

WEATHER; CMT 07/2200E CLEAR 15 3370  
07/2300E CLEAR 15 3605  
08/0000E CLEAR 15 1006  
08/0100E CLEAR 15 0907

WINDS; 7 MAY 1900 EST

5m 2325  
10m 2840  
15m 3060  
20m 2855  
30m 2955  
40m 2855  
50m 2850



DEPARTMENT OF THE AIR FORCE  
HEADQUARTERS 840TH COMBAT SUPPORT GROUP (TAC)  
LOCKBOURNE AIR FORCE BASE, OHIO 43217



REPLY TO  
ATTN OF: DC

6 JUN 1966

SUBJECT: Reported Sightings of UFO'S.

TO: FTD

Forwarded for your information and necessary action. Have been using your form because it covers more detailed information.

FOR THE COMMANDER

*John S. Buckwalter*  
JOHN S. BUCKWALTER, Lt Colonel, USAF  
Asst Chief, Operations and Training Division

10 Atch  
FTD Form 164



PROJECT 10073 RECORD

<p>1. DATE - TIME GROUP 20 May 66 21/0335Z</p>	<p>2. LOCATION Columbus, Ohio</p>
<p>3. SOURCE Civilian</p>	<p>10. CONCLUSION Aircraft ✓ <i>MM</i></p>
<p>4. NUMBER OF OBJECTS One</p>	
<p>5. LENGTH OF OBSERVATION N/A</p>	<p>11. BRIEF SUMMARY AND ANALYSIS Observer noted bright red object with a blinking light. Object moved slower than an airplane traveling in a westward direction.  Military aircraft were in the area and appear to have been responsible for the sighting.</p>
<p>6. TYPE OF OBSERVATION Ground Visual</p>	
<p>7. COURSE West</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>	



### 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?

20      MAY      66  
Day      Month      Year

2. Time of day:

20      35  
Hour      Minutes  
22      00 TO 2330

(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

COLUMBUS

City or Town

OHIO

State or County

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

\_\_\_\_\_ 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?

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      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: ?

VERY BRIGHT RED

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 HAD A BLINKING LIGHT

13. Did the object:

(Circle One for each question)

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



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

NO

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

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

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

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

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

a. Sound NONE

b. Color BRIGHT 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?

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? SLOWER THAN AN AIRPLANE

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?

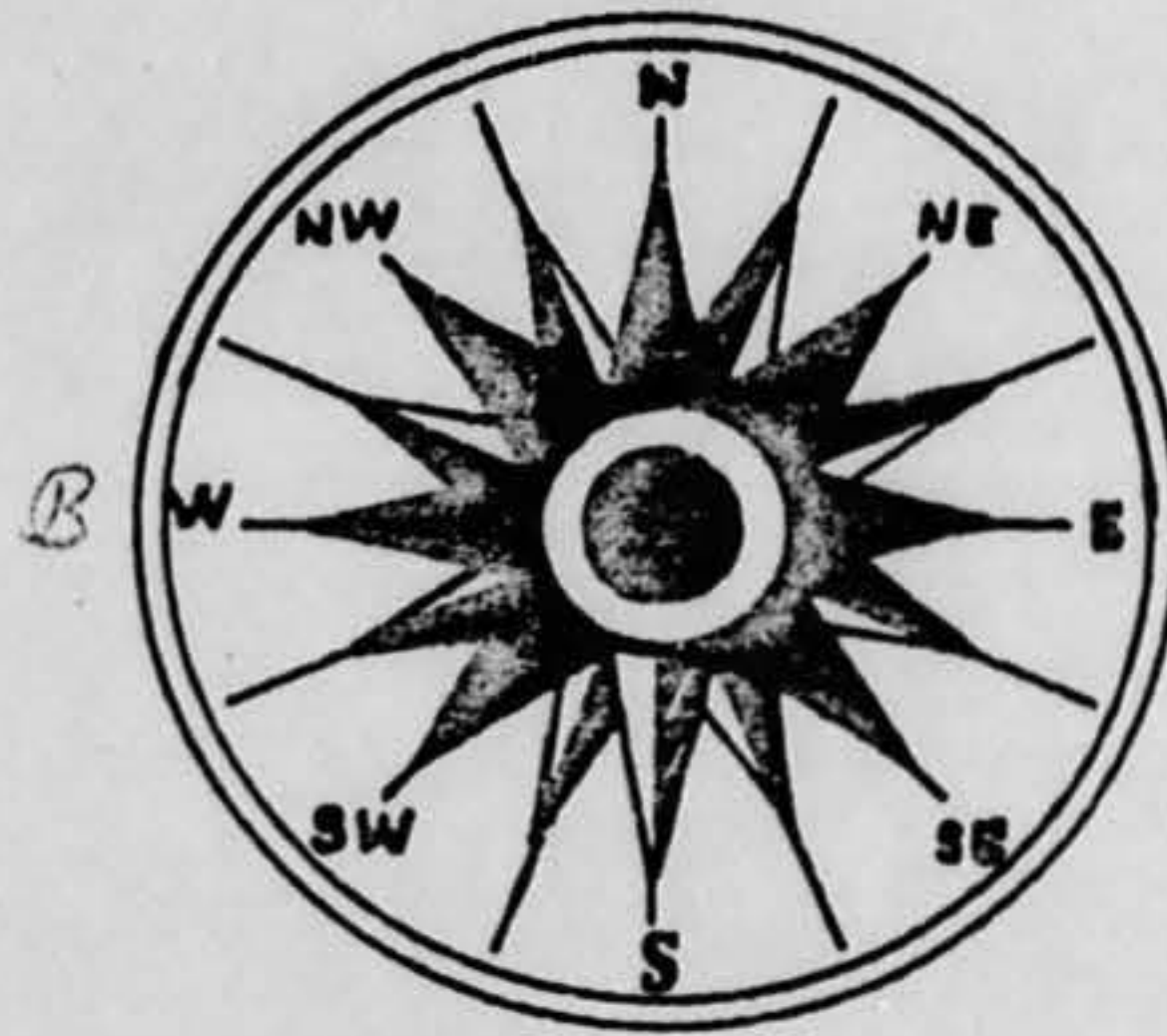
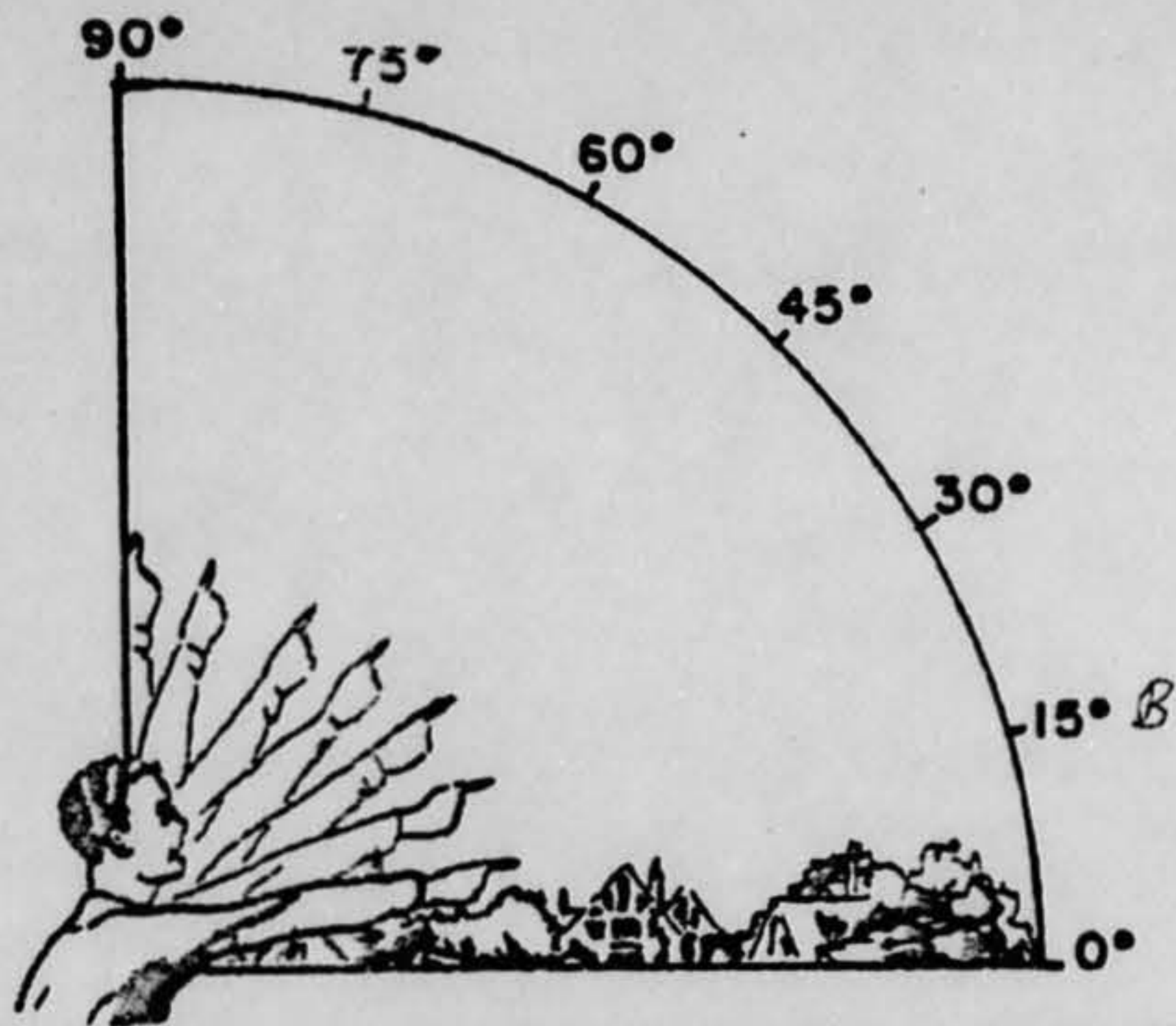
- |                 |     |    |                |     |    |
|-----------------|-----|----|----------------|-----|----|
| a. Eyeglasses   | Yes | No | e. Binoculars  | Yes | No |
| b. Sun glasses  | Yes | No | f. Telescope   | Yes | No |
| c. Windshield   | Yes | No | g. Theodolite  | Yes | No |
| d. 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.

APPRX SIZE OF BASEBALL



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.

IN THE 2200 HOUR SIGHTING, THE OBJECT LET AN AIRPLANE GET WITHIN 2 TO 2 1/2 BLOCKS OF IT AND IT TURNED ITS LIGHTS OUT.

1. WEATHER; LCK	1900E	100 (U) / (U) 11	2205
	2000E	130 (U) / (U) 11	2002
	2100E	130 (U) / (U) 11	1802
	2200E	110 (U) / (U) 11	3504

2. WINDS; 20 / 1900E

5 m	2520
10 m	2625
15 m	2750
20 m	2660
30 m	2680
40 m	2690
50 m	2665



COMMENTS OF PREPARING OFFICER:

Military Aircraft were in this area on the date/time indicated. Lack of reference points accounts for apparent movements. Descriptions fit landing lights, anti-collision lights and wing and tail lights.

*James D. Ballsmith*  
JAMES D. BALLSMITH  
Capt., USAF



**PROJECT 10073 RECORD**

<b>1. DATE - TIME GROUP</b> 28 May 1966 28/0830Z	<b>2. LOCATION</b> Columbus, Ohio (4 Witnesses)
<b>3. SOURCE</b> Civilian	<b>10. CONCLUSION</b> Possible (AIRCRAFT) ✓ <i>JH</i> Investigating Officer stated <del>that</del> there were a/c in the area on date/time indicated. Description fit landing lights, anti-collision lights and wing and tail lights.
<b>4. NUMBER OF OBJECTS</b> One - Two	
<b>5. LENGTH OF OBSERVATION</b> 30 Sec - 15 Min (Approx)	<b>11. BRIEF SUMMARY AND ANALYSIS</b> Object was tear drop shaped with protrusion like large wings. White, with brightness compared to the moon. Object disappeared by just fading away.
<b>6. TYPE OF OBSERVATION</b> Ground-Visual	
<b>7. COURSE</b> NE	
<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	



Inefficient info. but  
as far as data go, poss. A/C. *not* possible A/C

### 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? <u>28</u> <u>May</u> <u>66</u> Day Month Year		2. Time of day: <u>04</u> <u>00</u> Hour Minutes (Circle One): <input checked="" type="radio"/> A.M. or <input type="radio"/> P.M.	
3. Time Zone: (Circle One): <input checked="" type="radio"/> a. Eastern b. Central c. Mountain d. Pacific e. Other _____		(Circle One): <input type="radio"/> a. Daylight Saving <input checked="" type="radio"/> b. Standard	
4. Where were you when you saw the object? <u>[REDACTED]</u> <u>Columbus</u> <u>Ohio</u> Nearest Postal Address City or Town State or County			
5. How long was object in sight? (Total Duration) _____ Hours Minutes Seconds <u>30</u>			
a. <input type="radio"/> Certain <input checked="" type="radio"/> b. Fairly certain		c. <input type="radio"/> Not very sure d. <input type="radio"/> Just a guess	
5.1 How was time in sight determined? <u>Est.</u>			
5.2 Was object in sight continuously? Yes <input checked="" type="checkbox"/> No _____			
6. What was the condition of the sky? DAY NIGHT a. <input type="radio"/> Bright <input checked="" type="radio"/> a. Bright b. <input type="radio"/> 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. <input type="radio"/> In front of you b. <input type="radio"/> In back of you c. <input type="radio"/> To your right d. <input type="radio"/> To your left e. <input type="radio"/> Overhead f. <input type="radio"/> Don't remember <u>N/A</u>			



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:

MOON

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?                                | <input checked="" type="radio"/> Yes | 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?

Faded away

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 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?

Half

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.

Tear drop shaped

Protrusion like wings, large



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? Faster than Jet

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

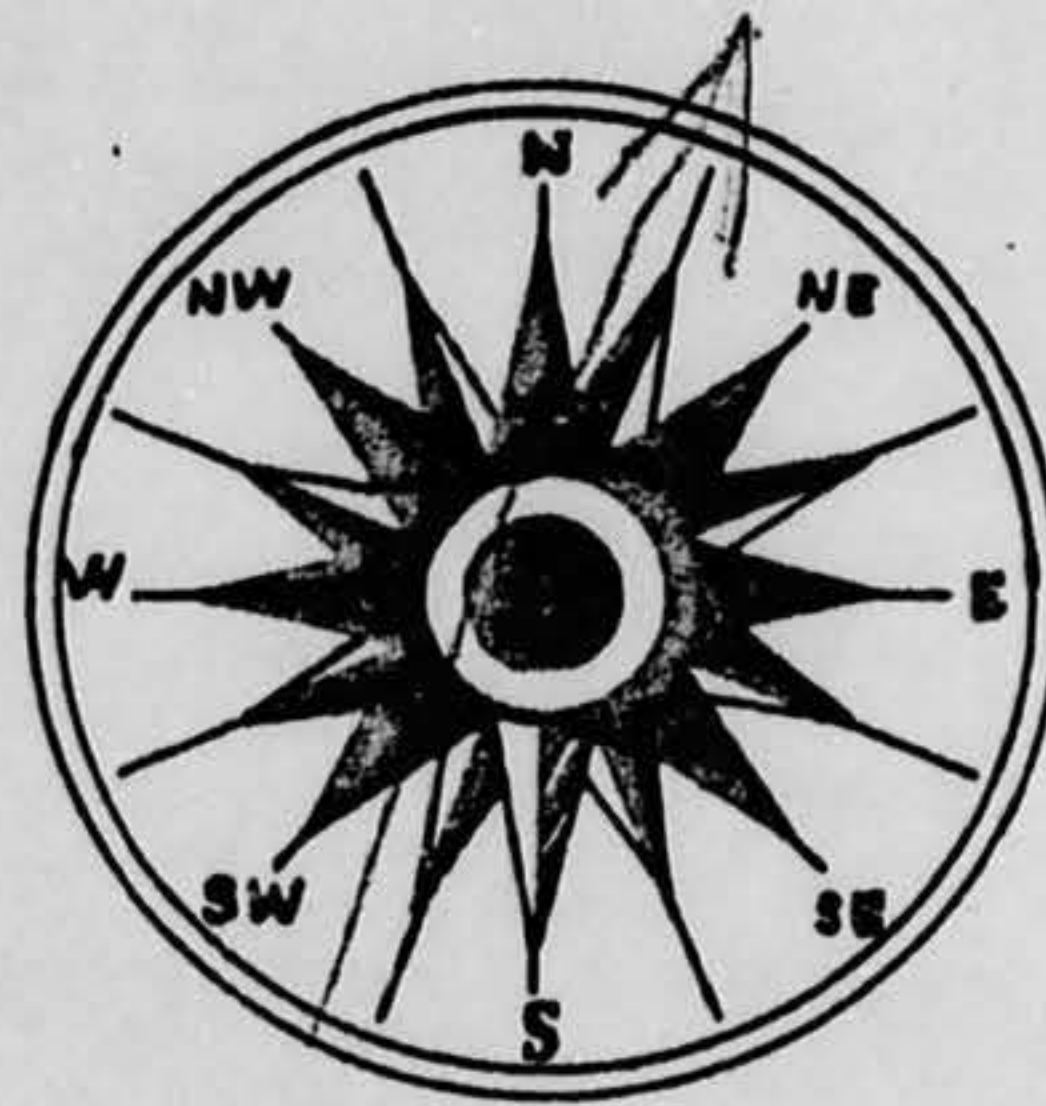
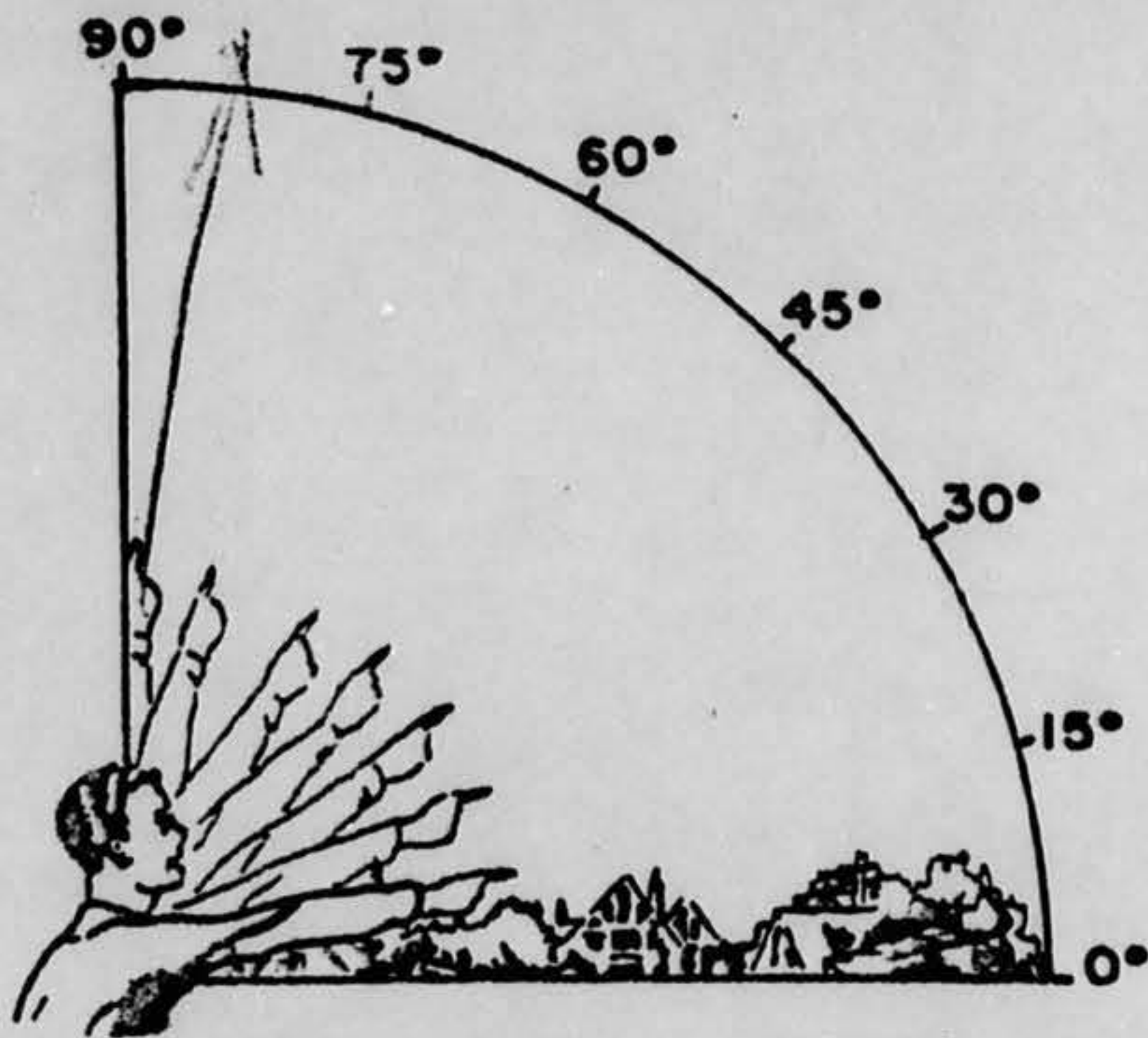
25. Did you observe the object through any of the following?

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



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/R



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:

20 people

Part at

[Redacted]

[Redacted]

male

15

Columbus  
ALL Saw it.

32. Please give the following information about yourself:

NAME

[Redacted]

[Redacted]

[Redacted]

First Name

Middle Name

ADDRESS

[Redacted]

Pickerington

Ohio

Street

City

Zone

State

TELEPHONE NUMBER

[Redacted]

AGE

16

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?

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.

1. WEATHER, CMH	0200E	CLEAR 10	0904
	0300E	CLEAR 10	1505
	0400E	CLEAR 10	1605
	0500E	1-07	1404

2. WINDS: 28/0700 EST

5 m	2920
10 m	2520
15 m	2820
20 m	2725
30 m	2520
40 m	2330
50 m	2425



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.



Comments of Preparing Officer:

Military Aircraft were in this area on the date/time indicated. Lack of reference points accounts for apparent movements. Descriptions fit landing lights, anti-collision lights and wing and tail lights.

*James D. Ballsmith.*  
JAMES D. BALLSMITH  
Capt., USAF



*Insert Info - used 27/83  
 per interview  
 possible A/C*

**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>27</u> <u>May</u> <u>66</u>          Day Month Year</p>	<p>2. Time of day: <u>03</u> <u>30</u>          Hour Minutes</p> <p>(Circle One): <u>A.M.</u> or P.M.</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?

[REDACTED] Columbus Ohio  
 Nearest Postal Address City or Town State or County

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? \_\_\_\_\_

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

6. What was the condition of the sky?

<p>DAY</p> <p>a. Bright          b. Cloudy</p>	<p>NIGHT</p> <p>a. Bright          b. Cloudy</p>
--	--

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

N



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 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

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 |



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

↳ Rushed away

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 Orange

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

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.

Streamlined



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 |
- N / R

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?

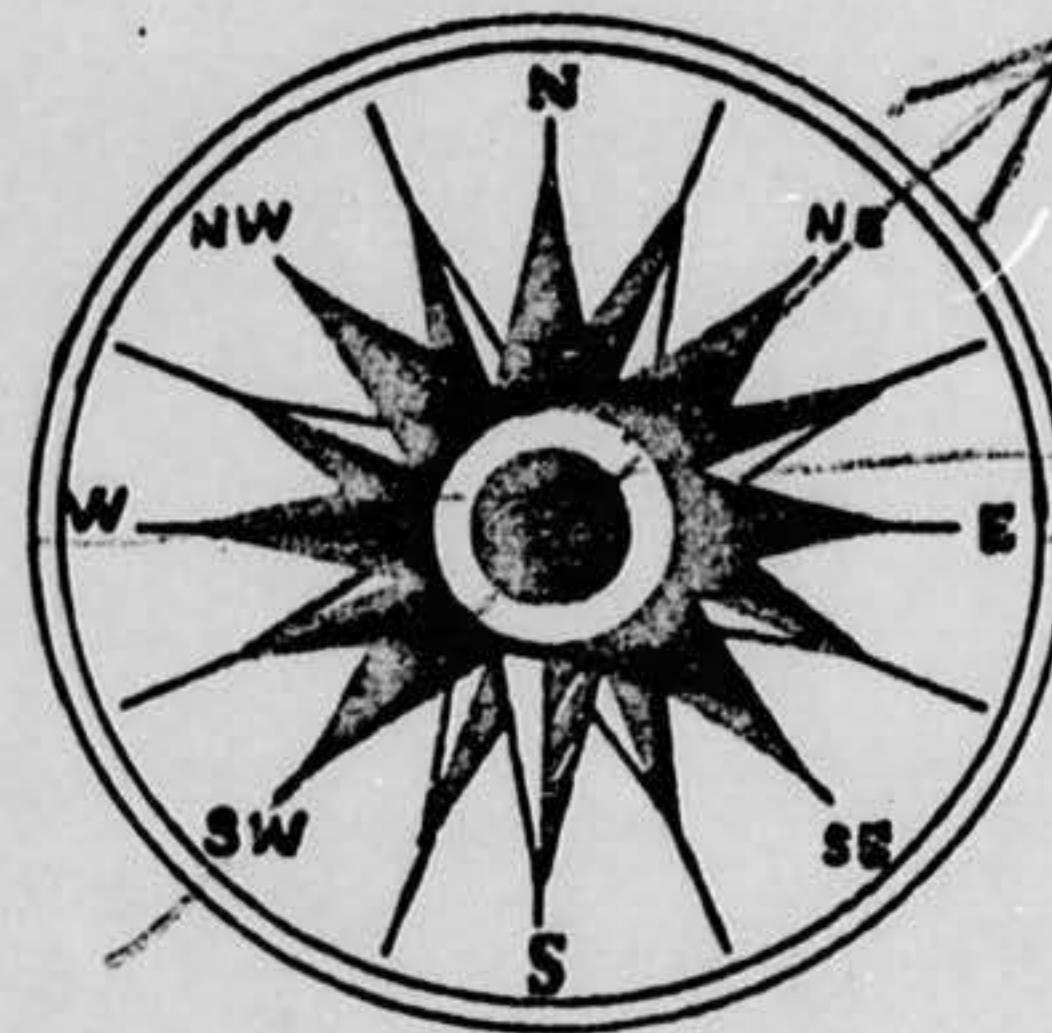
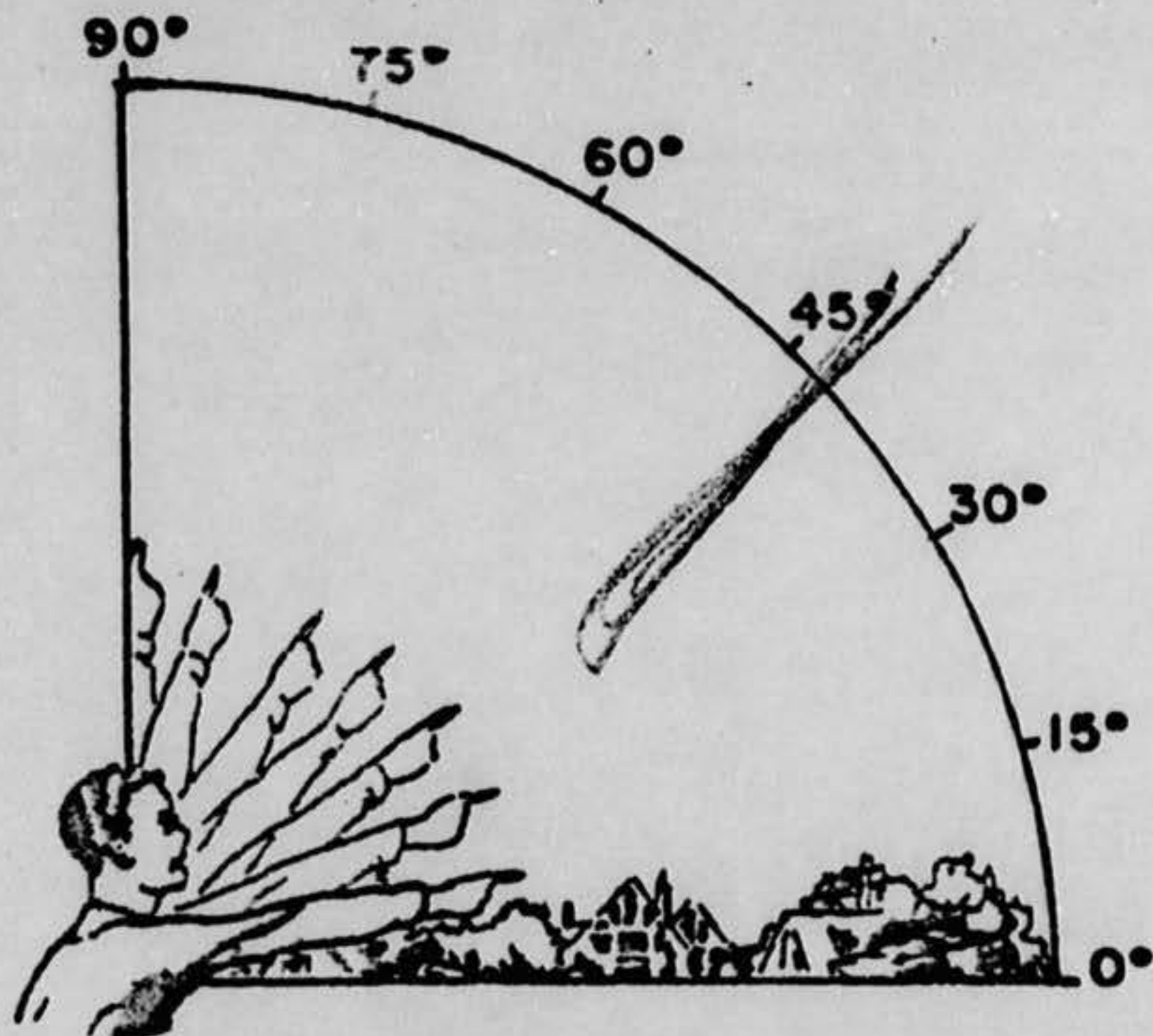
- |                 |                           |                                     |                |                           |                                     |
|-----------------|---------------------------|-------------------------------------|----------------|---------------------------|-------------------------------------|
| 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.

Bright Head light



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.



white  
like  
star

orange  
light

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

29. IF there was MORE THAN ONE object, then how many were there? 2

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



Crossed vision white  
watching white first



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 and Address]

Ph. [Redacted Phone Number]

Columbus

Age 17  
Male

32. Please give the following information about yourself:

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

ADDRESS [Redacted] Columbus 12 Ohio  
Street City Zone State

TELEPHONE NUMBER [Redacted] AGE 16 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?

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



34. Date you completed this questionnaire:

28	May	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.

1. WEATHER; CMH

0200 E	1-⑩10	0905
0300 E	1-⑩10	1004
0400 E	1-⑩10	1105
0500 E	1-⑩10	1005

2. WINDS; 27/0700 EST

5m	2510
10m	2805
15m	2720
20m	2710
30m	2320
40m	2355
50m	2425



COMMENTS OF PREPARING OFFICER:

Military Aircraft were in this area on the date/time indicated. Lack of reference points accounts for apparent movements. Descriptions fit landing lights, anti-collision lights and wing and tail lights.

*James D. Ballsmith.*  
JAMES D. BALLSMITH  
Capt., USAF



PROJECT 10073 RECORD

<p>1. DATE &amp; TIME GROUP 29 May 66 30/0045Z</p>	<p>2. LOCATION Columbus, Ohio (6 witnesses)</p>
<p>3. SOURCE Civilian</p>	<p>10. CONCLUSION Aircraft (possible)</p>
<p>4. NUMBER OF OBJECTS One</p>	
<p>5. LENGTH OF OBSERVATION 15 minutes</p>	<p>11. BRIEF SUMMARY AND ANALYSIS Observer noted egg shaped object that appeared brighter than the brightest star. Object suddenly speeded up and disappeared out of sight heading straight up.</p>
<p>6. TYPE OF OBSERVATION Ground Visual</p>	<p>Military aircraft were in the area and could have accounted for the observation.</p>
<p>7. COURSE South</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>	



COMMENT:—

MOON REFLECTION — NOTHING REPORTED IN AREA







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? | <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?                           | 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?

JUST WENT OUT OF SIGHT  
STRAIGHT UP

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: \_\_\_\_\_

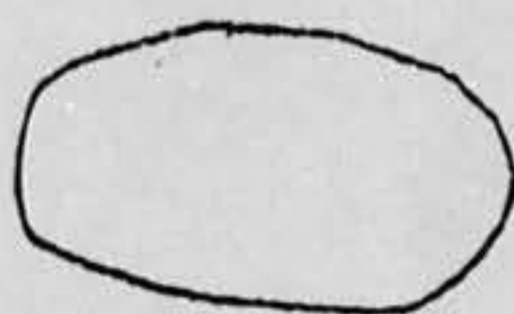
17. Tell in a few words the following things about the object:

a. Sound NO  
b. Color BLACK

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 1 INCH

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.



OBLONG SHAPE  
LIKE AN EGG



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? 10 TO 15 MPH

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? 15 TO 20 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? \_\_\_\_\_ 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?

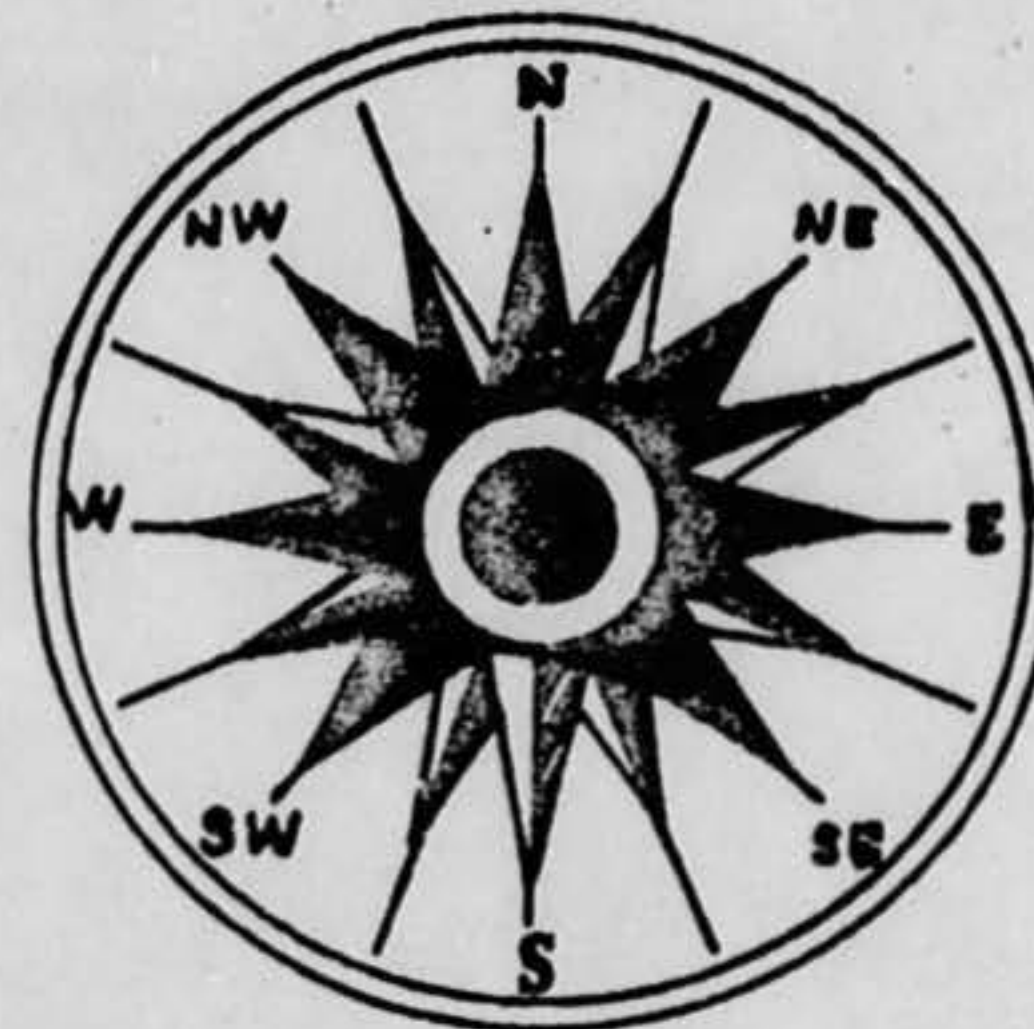
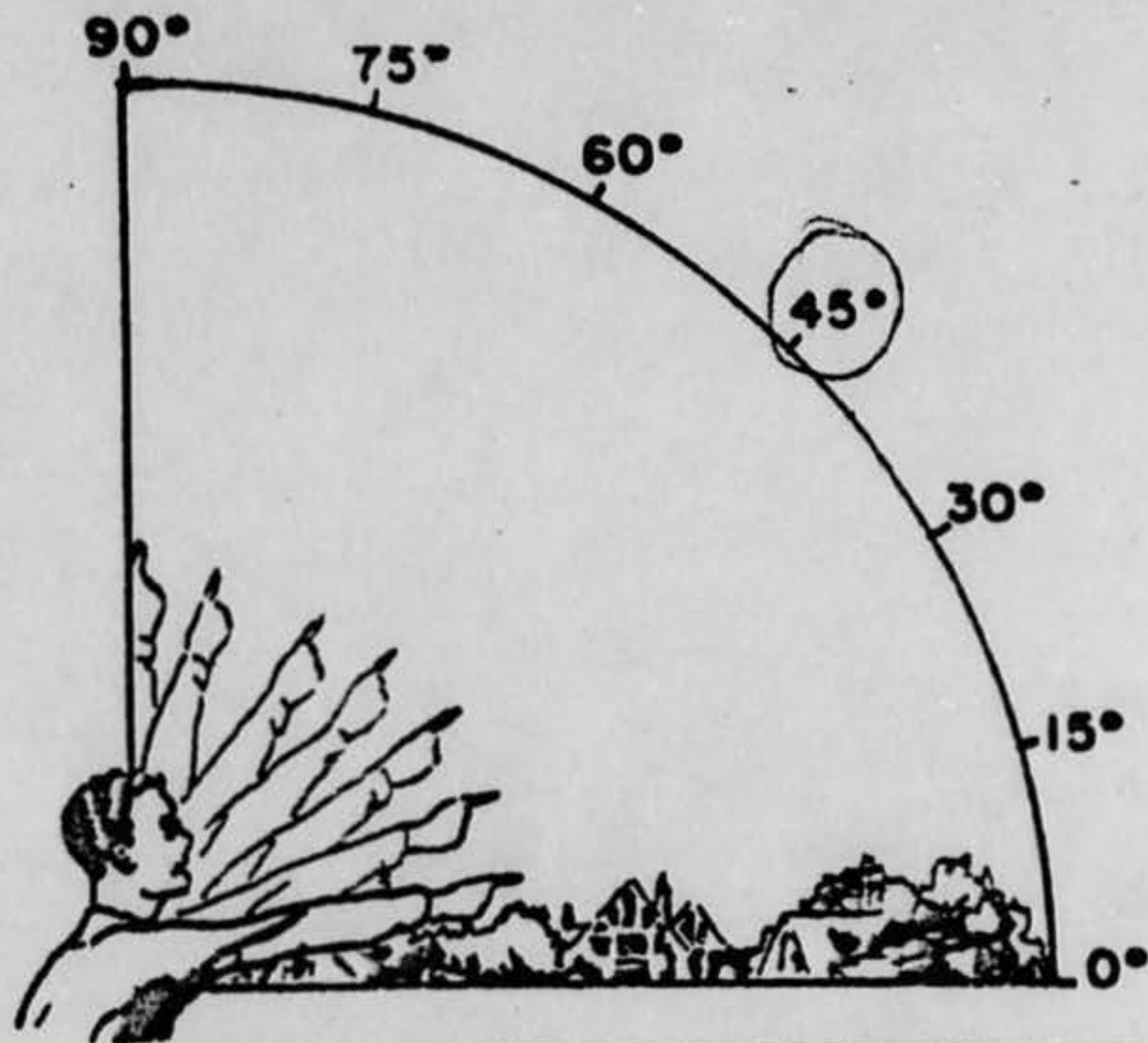
- |                 |     |                                     |                |     |                                     |
|-----------------|-----|-------------------------------------|----------------|-----|-------------------------------------|
| a. Eyeglasses   | Yes | <input checked="" type="radio"/> 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.

EGGE



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.



START STRAIGHT UP

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  
 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]  
[REDACTED]  
[REDACTED]  
[REDACTED]

32. Please give the following information about yourself:

NAME [REDACTED] [REDACTED] HM  
Last Name First Name Middle Name  
ADDRESS [REDACTED] COLUMBUS  OH  
Street City Zone State  
TELEPHONE NUMBER [REDACTED] AGE 43 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?

29 MAY 1966  
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.

1. WEATHER; LEM 1800E / 1011 3406  
 1900E 1400 / - 11 3507  
 2000E 1400 / - 11 3303  
 2100E 1400 / - 11 0000

2. WINDS; 29/1900 EST

5M	3310
10M	2825
15M	2855
20M	2865
30M	2785
40M	2870
50M	2635



COMMENTS OF PREPARING OFFICER:

Military Aircraft in this area on the date/time indicated. Lack of reference points accounts for apparent movements. Descriptions fit landing lights, anti-collision lights and wing and tail lights.

*James D. Ballsmith.*  
JAMES D. BALLSMITH  
Capt., USAF



PROJECT 10073 RECORD

1. DATE - TIME GROUP 29 May 66 30/0330Z	2. LOCATION Columbus, Ohio <i>(2 witnesses)</i>
3. SOURCE Civilian	10. CONCLUSION Astro (meteor)
4. NUMBER OF OBJECTS One	
5. LENGTH OF OBSERVATION 10 seconds	11. BRIEF SUMMARY AND ANALYSIS Observer noted object that appeared as a light being sharply outlined. Object was observed falling downward being visible for about 10 seconds until it disintegrated.
6. TYPE OF OBSERVATION Ground Visual	
7. COURSE North	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	



Call to check time -

### 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 MAY 1966  
Day Month Year

2. Time of day: 1030 4  
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?

CLEVELAND AND 25TH COLUMBUS 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?

GUES

5.2 Was object in sight continuously?

Yes \_\_\_\_\_ No X

*10-15  
seconds  
W.F.M.  
per communication  
9 Aug. 66*

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