

PROJECT 10073 RECORD CARD

1. DATE 28 April, 1960		2. LOCATION Cincinatti, Ohio		12. CONCLUSIONS ☐ Was Balloon ☐ Probably Balloon ☐ Possibly Balloon ☐ Was Aircraft ☐ Probably Aircraft ☐ Possibly Aircraft ☐ Was Astronomical ☐ Probably Astronomical ☐ Possibly Astronomical	
3. DATE-TIME GROUP Local 2030-2045 GMT 29/0130Z		4. TYPE OF OBSERVATION ☒ Ground-Visual ☐ Ground-Radar ☐ Air-Visual ☐ Air-Intercept Radar			
5. PHOTOS XX No (NO Pictures)		6. SOURCE Civilian			
7. LENGTH OF OBSERVATION seconds over 15 minutes		8. NUMBER OF OBJECTS One		9. COURSE Varied	
10. BRIEF SUMMARY OF SIGHTING Several different sightings of red, green, and white lights by six children at various times during a fifteen minute period. Longest sighting lasted only a few seconds. Always disappearing and usually with random motion. In city of Cincinatti, Ohio with WX cloudy with haze.				11. COMMENTS In view of the random movement and location in the city together with low clouds and haze it is quite possible that the children were observing light reflections from the haze or clouds.	
12. CONCLUSIONS ☒ Other Light Reflections ☐ Insufficient Data for Evaluation ☐ Unknown					

April 29, 1960.

Dear Sir:

I wish to report a sighting of about four unidentified flying objects and four other persons saw on the night of April 28, 1960 from 8:30 to 8:43 p.m. I wish to note that each and the five of us were it seeing spots before our eyes. Here is what happened. Our names, address, ages and telephone numbers are at the end of this report.

At 8:30 p.m. I saw a red light in the sky stationary in the northeast. I call one of the persons ~~_____~~ over to watch the object. We watched it for about fifteen seconds and then it disappeared. Then another one exactly the same appeared and did the same as the first. As I and ~~_____~~ stood there the other three persons came over by us but the four of them left and I was there alone. Just then a very strange light came falling at a very high rate of speed and then disappeared behind some houses.

Just then another object appeared in the northeast heading west at a fairly high rate of speed and then it stopped. I yelled for ~~_____~~ everybody came. ~~_____~~ was the first to reach me and we both saw it turn and vanish into the east. Now all of us were together when we saw the same object or one similar to it appear in the same spot. As it was moving west, it ~~was~~ stopped and

Suddenly to turn as it did, it glowed very brightly and kept on glancing for about seven or eight seconds and took off to the east at a very high rate of speed.

The objects were about 850 to 900 feet high.

It was partly cloudy with a few stars shining and a dull moonlight and a slight breeze.

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Cincinnati 36, Ohio

Age 14

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age 11

ATLANTA

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OFFICIAL

Cincinnati 36, Ohio

AGE-12

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AFCIN-4E2 g

Susp cy

5 May 60

UFO Sighting (~~REDACTED~~)

SAFOI-3d (Maj Tacker)

Suggest three questionnaires be forwarded for completion by ~~REDACTED~~
~~REDACTED~~ and ~~REDACTED~~

FOR THE COMMANDER:

PHILIP O. EVANS
Colonel, USAF
Deputy for Sciences and Components

1 Atch:
Cy ltr 29 Apr 60 fr
~~REDACTED~~

U. S. AIR FORCE TECHNICAL INFORMATION SHEET

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, and will be regarded as confidential material. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that, if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

28 Day 4 Month 60 Year

2. Time of day: 8 Hour 45 Minutes

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

3. Time zone:

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

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

4. Where were you when you saw the object?

[REDACTED] Nearest Postal Address Cincinnati 36 City or Town Ohio State or Country

Additional remarks: _____

5. Estimate how long you saw the object. 0 Hours 15 Minutes 0 Seconds

5.1 Circle one of the following to indicate how certain you are of your answer to Question 5.

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

6. What was the condition of the sky?

(Circle One): a. Bright daylight d. Just a trace of daylight
b. Dull daylight e. No trace of daylight
c. Bright twilight f. Don't remember

7. IF you saw the object during DAYLIGHT, TWILIGHT, or DAWN, 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, TWILIGHT, or DAWN, 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. Was the object brighter than the background of the sky?

(Circle One):

a. Yes

b. No

c. Don't remember

10. IF it was BRIGHTER THAN the sky background, was the brightness like that of an automobile headlight?:

(Circle One) a. A mile or more away (a distant car)?

b. Several blocks away?

c. A block away?

d. Several yards away?

e. Other

11. Did the object:

(Circle One for each question)

- a. Appear to stand still at any time?
- b. Suddenly speed up and rush away at any time?
- c. Break up into parts or explode?
- d. Give off smoke?
- e. Change brightness?
- f. Change shape?
- g. Flicker, throb, or pulsate?

Yes

No

Don't Know

Yes

No

Don't Know

Yes

No

Don't Know

Yes

No

Don't Know

Yes

No

Don't Know

Yes

No

Don't Know

Yes

No

Don't Know

12. Did the object move behind something at anytime, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

it moved behind:

a house and trees

13. Did the object move in front of something at anytime, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

it moved in front of:

a house and trees

14. Did the object appear: (Circle One):

a. Solid?

b. Transparent?

c. Don't Know.

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

- a. Eyeglasses
- b. Sun glasses
- c. Windshield
- d. Window glass

Yes

No

Yes

No

Yes

No

Yes

No

e. Binoculars

Yes

No

f. Telescope

Yes

No

g. Theodolite

Yes

No

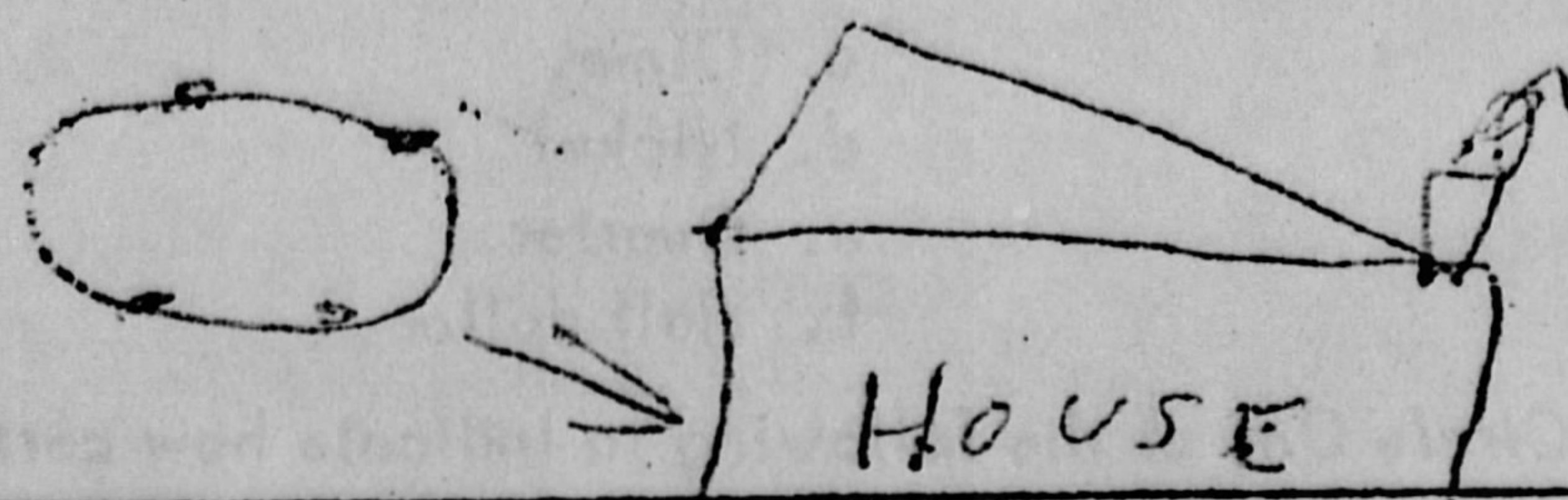
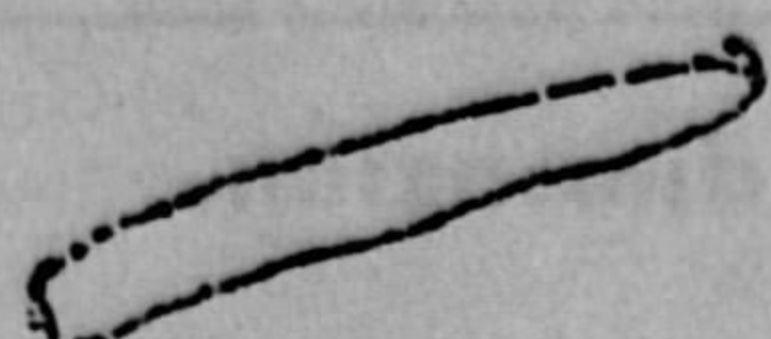
h. Other

16. Tell in a few words the following things about the object.

a. Sound none

b. Color red, white, and green, lights

17. 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.

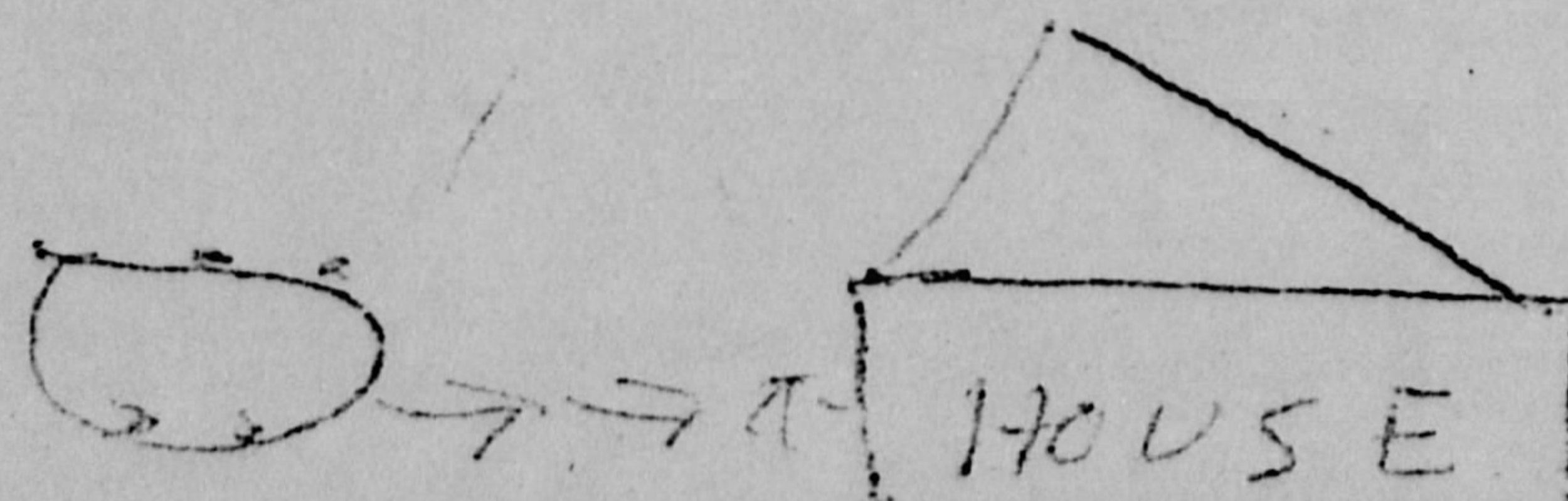
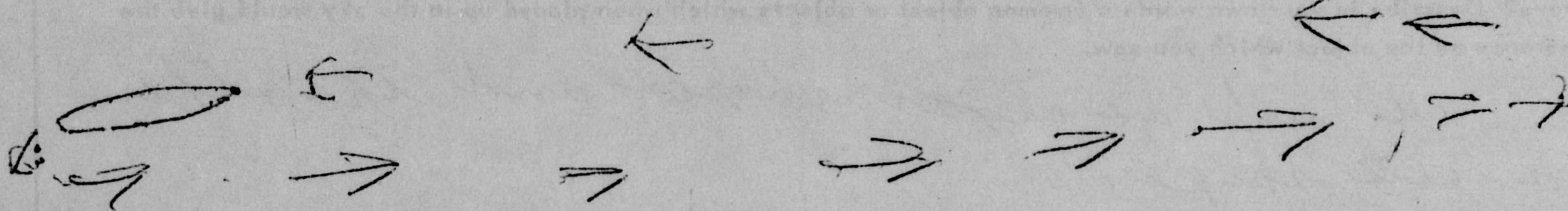


18. The edges of the object were:

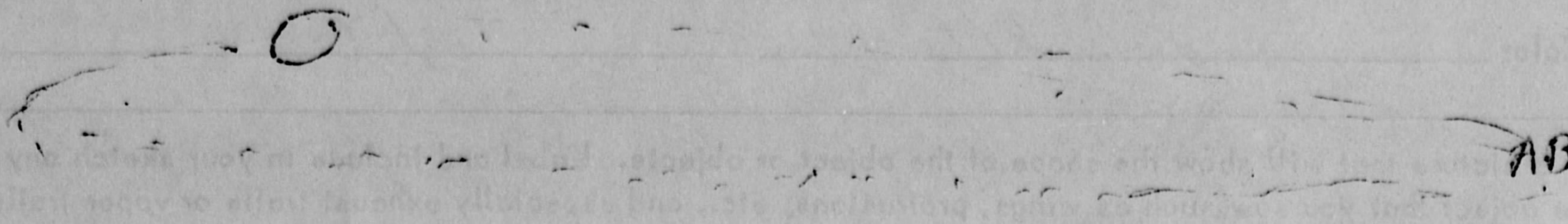
- (Circle One):
- a. Fuzzy or blurred
 - b. Like a bright star
 - c. Sharply outlined
 - d. Don't remember

e. Other _____

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



20. 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.



21. IF POSSIBLE, try to guess or estimate what the real size of the object was in its longest dimension.
50 feet.

22. How large did the object or objects appear as compared with one of the following objects held in the hand and at about arm's length?

(Circle One):

- a. Head of a pin
- b. Pea
- c. Dime
- d. Nickel
- e. Quarter
- f. Half dollar

- g. Silver dollar
- h. Baseball
- i. Grapefruit
- j. Basketball
- k. Other _____

22.1 (Circle One of the following to indicate how certain you are of your answer to Question 22.

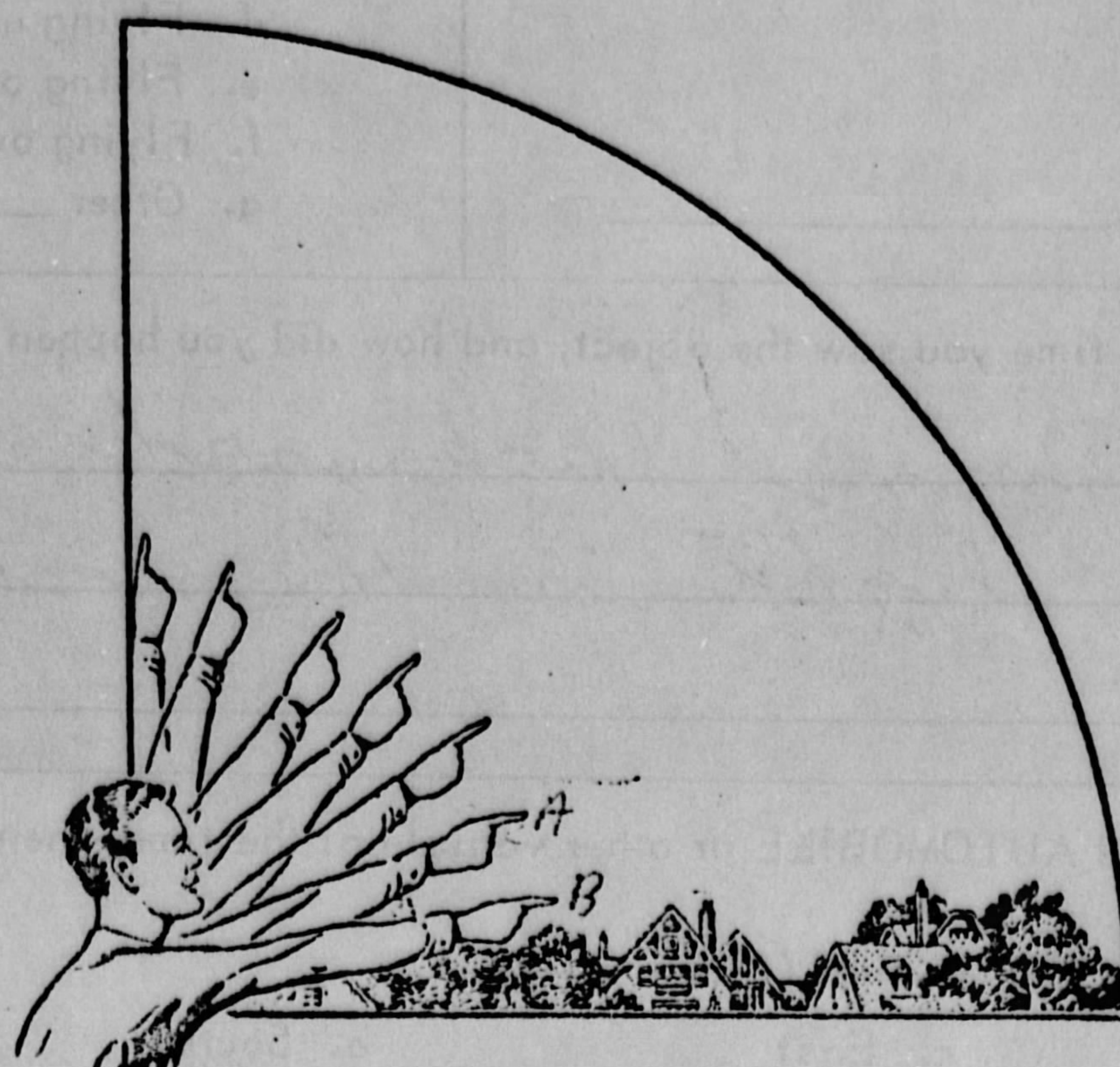
- a. Certain
- b. Fairly certain
- c. Not very sure
- d. Uncertain

23. How did the object or objects disappear from view? appeared in northeast
traveled west, reversed course shot off to the
northeast at high rate of speed.

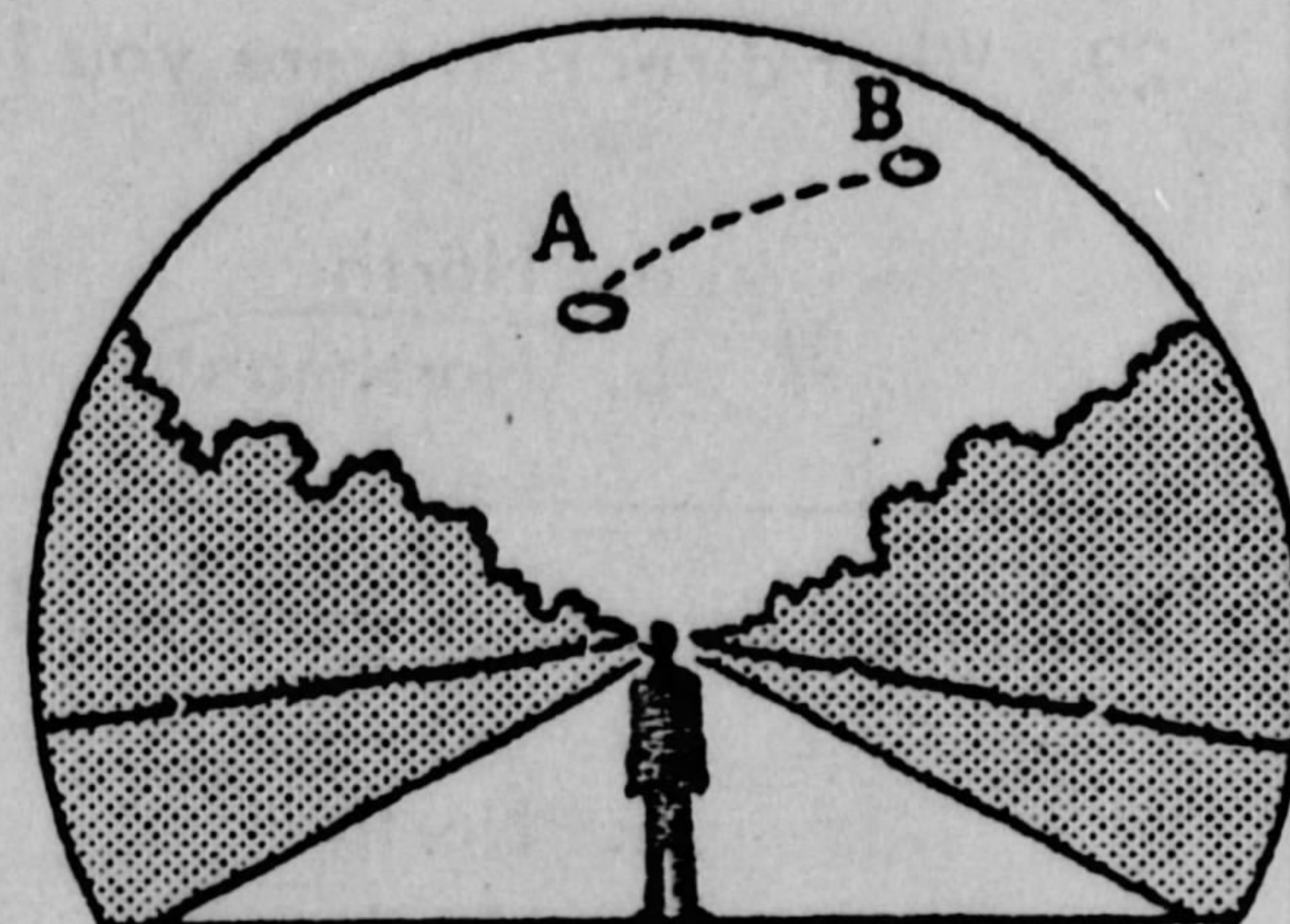
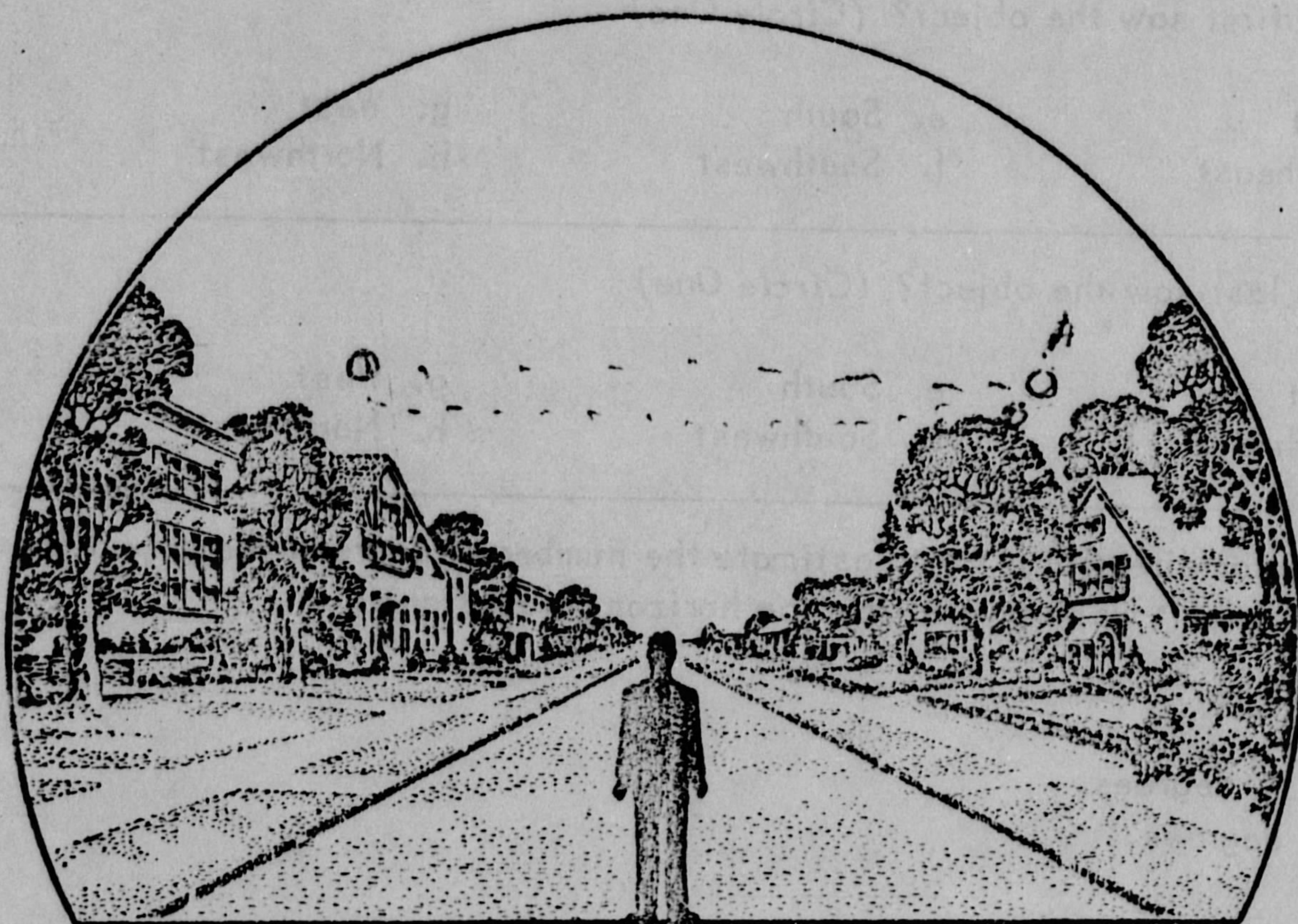
24. In order that you can give as clear a picture as possible of what you saw, we would like for you to imagine that you could construct the object that you saw. Of what type material would you make it? How large would it be, and what shape would it have? Describe in your own words a common object or objects which when placed up in the sky would give the same appearance as the object which you saw.

I would make one cigar shaped and the other
saucer shape.

32. 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.



33. In the following larger sketch place an "A" at the position the object was when you *first* saw it, and a "B" at its position when you *last* saw it. Refer to smaller sketch as an example of how to complete the larger sketch.



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

34.1 CLOUDS (Circle One)

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds
- e. Don't remember

34.2 WIND (Circle One)

- a. No wind
- b. Slight breeze
- c. Strong wind
- d. Don't remember

34.3 WEATHER (Circle One)

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

34.4 TEMPERATURE (Circle One)

- a. Cold
- b. Cool
- c. Warm
- d. Hot
- e. Don't remember

35. When did you report to some official that you had seen the object?

30 11 60
Day Month Year

36. Was anyone else with you at the time you saw the object?

(Circle One) Yes No

36.1 IF you answered YES, did they see the object too?

(Circle One) Yes No

36.2 Please list their names and addresses:

[Redacted]
Cincinnati 36, Ohio

[Redacted]
Cincinnati 36, Ohio
[Redacted]
Cincinnati 36, Ohio

37. Was this the first time that you had seen an object or objects like this?

(Circle One) Yes No

37.1 IF you answered NO, then when, where, and under what circumstances did you see other ones?

I have sent the report in

38. In your opinion what do you think the object was and what might have caused it?

We ~~don't~~ don't know but it was no airplane
or balloon.

39. 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? 1000 m.p.h.

40. 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? Two feet. miles

41. Please give the following information about yourself:

NAME [redacted] [redacted] [redacted]
Last Name First Name Middle Name

ADDRESS [redacted] Cincinnati 36 Ohio
Street City Zone State

TELEPHONE NUMBER [redacted]

What is your present job? _____

Age 13 Sex male

Please indicate any special educational training that you have had.

- | | |
|----------------------------------|---------------------------------|
| a. Grade school <u>7th grade</u> | e. e. Technical school _____ |
| b. High school _____ | (Type) _____ |
| c. College _____ | f. Other special training _____ |
| d. Post graduate _____ | _____ |

42. Date you completed this questionnaire:

31 5 60
Day Month Year

U. S. AIR FORCE TECHNICAL INFORMATION SHEET

(SUMMARY DATA)

In order that your information may be filed and coded as accurately as possible, please use the following space to write out a short description of the event that you observed. You may repeat information that you have already given in the questionnaire, and add any further comments, statements, or sketches that you believe are important. Try to present the details of the observation in the order in which they occurred. Additional pages of the same size paper may be attached if they are needed.

NAME [REDACTED]
(Please Print)

(Do Not Write in This Space)

CODE:

SIGNATURE [REDACTED]

DATE [REDACTED]