PROJECT 10073 RECORD CARD

1. DATE	2. LOCATION	12. CONCLUSIONS
18 Jul 62	Dayton Ohio Area	☐ Was Balloon ☐ Probably Balloon ☐ Possibly Balloon
3. DATE-TIME GROUP Local _____ GMT 19/0245Z-0615Z	**4. TYPE OF OBSERVATION** ☐ Ground-Visual ☐ Ground-Radar ☐ Air-Visual ☐ Air-Intercept Radar	☐ Was Aircraft ☐ Probably Aircraft ☐ Possibly Aircraft
5. PHOTOS ☐ Yes ☐ No	**6. SOURCE** Civilian	☐ Was Astronomical Jupiter ☐ Probably Astronomical ☐ Possibly Astronomical
7. LENGTH OF OBSERVATION 2 hrs plus	**8. NUMBER OF OBJECTS** one	**9. COURSE** West
		☐ Other _____ ☐ Insufficient Data for Evaluation ☐ Unknown

10. BRIEF SUMMARY OF SIGHTING

Multiple sightings of obj fluctuating or oscillating. In sight for over two hrs & still visible. Movement slow to West. Believed to be star or planet by official taking rpt.

11. COMMENTS

Rptd obj visible to official taking info. Multiple calls. Planet Jupiter was at 30dgr elev, 110dgr azimuth at 1115PM Local. At 0115 it had moved to an azimuth of 130dgr & elev of 130 dgr. Jupiter only 1 planet visible at this time, as both Venus & Mars had either set or were not yet up. Case evaluated as Jupiter.

ATIC FORM 329 (REV 26 SEP 52)

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. How large did the object appear to you as compared to an object with which you are familiar?

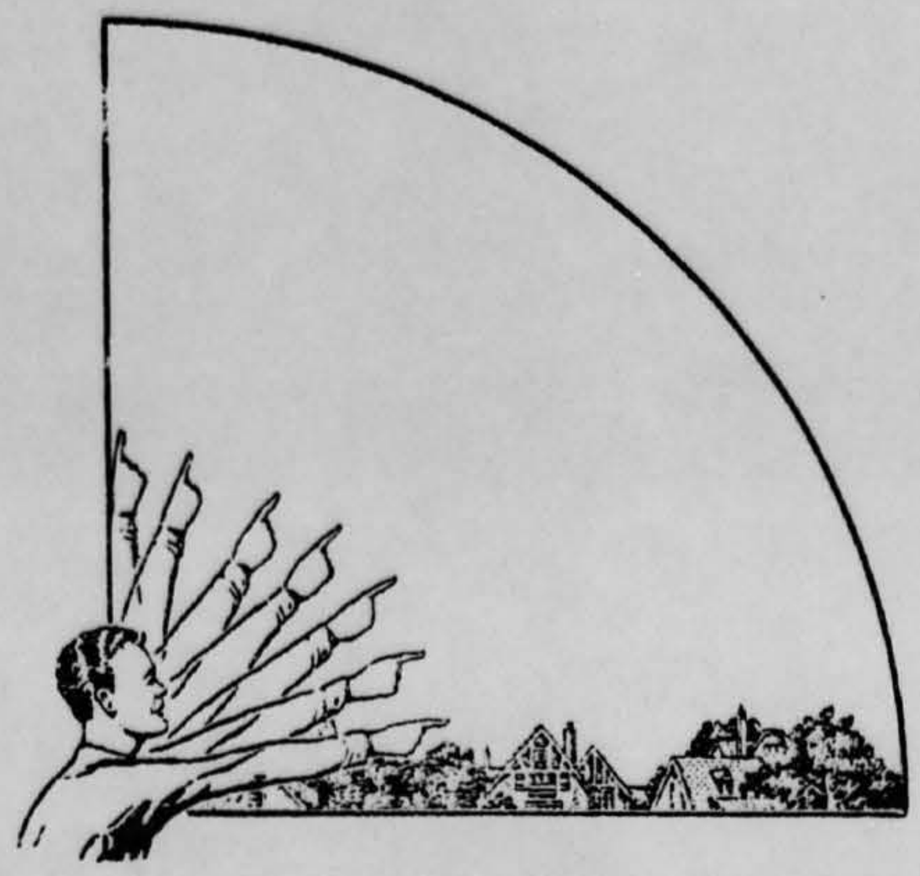
22. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

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

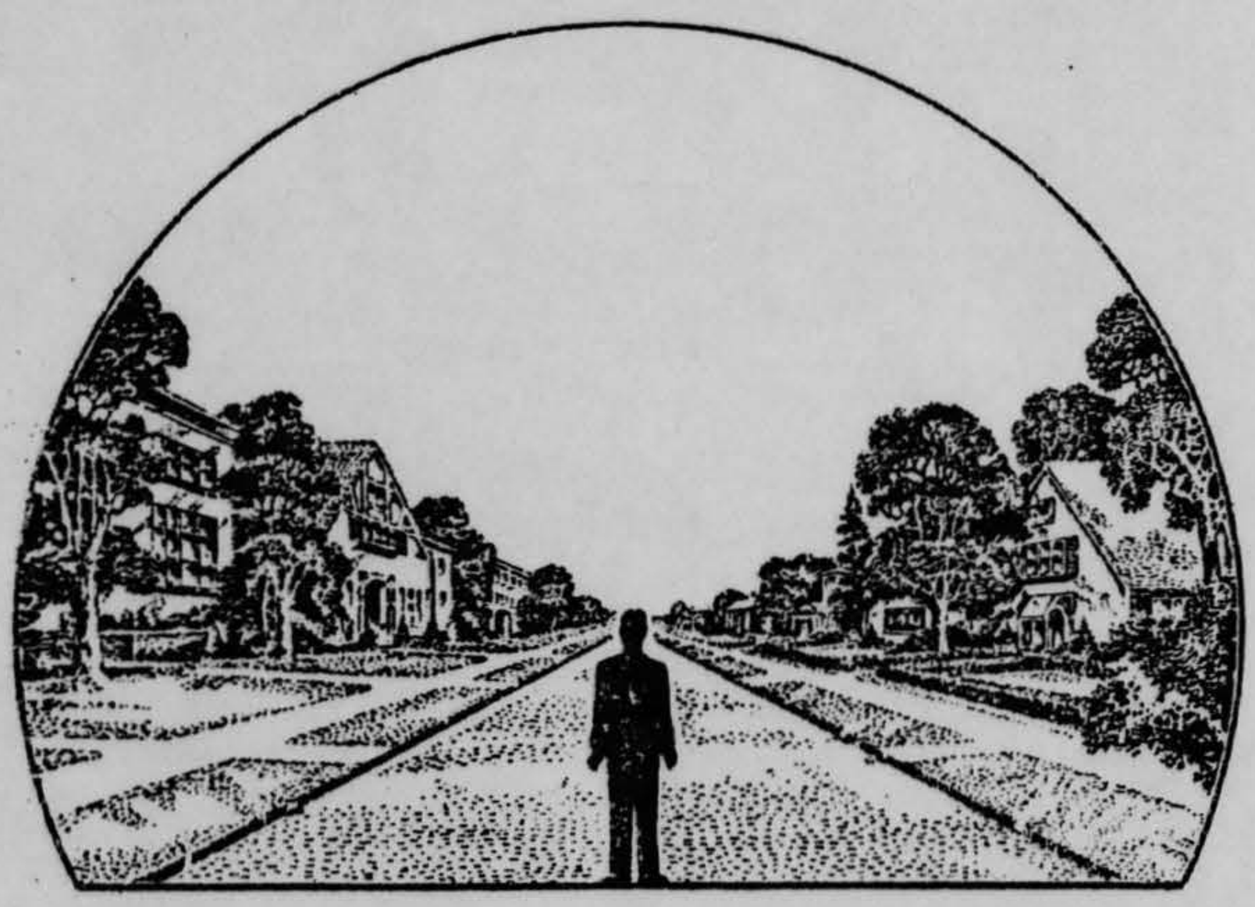
24. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

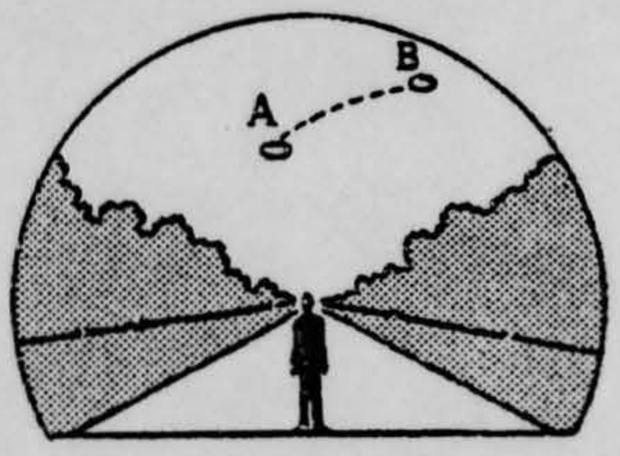
Object was slowly and moved across heavens at slow rate (I believe observer was viewing planet — I mentally checked his observation & it appeared to be moving on other large planet. It was unusually bright and appeared about 30 above horizon.) Observer went to tracking this object with his eyes.

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.





25. 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_____

26. 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_____

27. What were you doing at the time you saw the object, and how did you happen to notice it?

_____

_____

_____

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

28.1 What direction were you moving? *(Circle One)*

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

28.2 How fast were you moving?_____ miles per hour.

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

(Circle One) Yes No

29. What direction were you looking when you first saw the object? *(Circle One)*

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

30. What direction were you looking when you last saw the object? *(Circle One)*

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

31. If you are familiar with bearing terms (angular direction) try to estimate the number of degrees the object was from true North (thru east) and also the number of degrees it was upward from the horizon (elevation).

31.1 When it first appeared:

a. From true North_____degrees.
b. From horizon _____ degrees.

31.2 When it disappeared:

a. From true North_____ degrees.
b. From horizon _____degrees.

34. 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

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

_____ 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:

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?

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

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? _____

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? _____

41. Please give the following information about yourself:

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

ADDRESS [redacted] DAYTON OHIO
Street City Zone State
MAD RIVER Township

TELEPHONE NUMBER [redacted]

Age _____ Sex _____

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

42. Date you completed this questionnaire: _____ _____ _____
Day Month Year

[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?

18 (Day) 5/ (Month) 62 (Year)

2. Time of day: 2305 (Hour / Minutes)

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

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

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

4. Where were you when you saw the object?

_____ Nearest Postal Address _____ City or Town _____ State or Country

Additional remarks: _____

5. How long was object in sight? _____ Hours _____ Minutes _____ Seconds

5.1 How was time in sight determined?

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

6. What was the condition of the sky?

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

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

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

FORM FTD JUL 61 164 This form supersedes ATIC 164, Feb 60, which is obsolete.

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. The object appeared:

(Circle One): a. As a light b. Shiny c. Dark d. Don't remember

10. If it appeared as a light, was it brighter than the brightest stars?

11. 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

12. 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: _____

_____

13. 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: _____

_____

14. Did the object appear: *(Circle One)*: a. Solid b. Transparent c. Vapor d. Don't Know

15. 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 _____		

Venus Civilian Police Mr. [redacted]

V 10.32 15.56 (Nup 22 56 56.7 23)2
Mars 4 17 32.56

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?

18 Day Jul Month 62 Year

2. Time of day: 2305 Hour Minutes

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

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

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

4. Where were you when you saw the object?

_____ Nearest Postal Address _____ City or Town _____ State or Country

Additional remarks: _____

5. How long was object in sight? _____ Hours _____ Minutes _____ Seconds

5.1 How was time in sight determined?

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

6. What was the condition of the sky?

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

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

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

FTD FORM JUL 61 164 This form supersedes ATIC 164, Feb 60, which is obsolete.

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? _____

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? _____

41. Please give the following information about yourself:

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

ADDRESS Civilian Police WPAFB _____
Street City Zone State

TELEPHONE NUMBER [redacted]

Age _____ Sex _____

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

Civilian Police

42. Date you completed this questionnaire: _____ _____ _____
Day Month Year

Lt Edw L. Stepfen, FTD OD 17 JUL 1962

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?

15 (Day) / Jul (Month) / 62 (Year)

2. Time of day: 0115 (Hour) _____ (Minutes)

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

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

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

4. Where were you when you saw the object?

[redacted] AVE (Nearest Postal Address) / MAD River (City or Town) / DAYTON OHIO (State or Country)

Additional remarks: _____

5. How long was object in sight? 2 (Hours) _____ (Minutes) _____ (Seconds)

5.1 How was time in sight determined?

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

6. What was the condition of the sky?

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

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

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

FORM FTD JUL 61 164 This form supersedes ATIC 164, Feb 60, which is obsolete.

34. 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

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

_____ 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:

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?

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

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. The object appeared: appeared as very bright object, much larger than any star.

(Circle One): a. As a light b. Shiny c. Dark d. Don't remember

10. If it appeared as a light, was it brighter than the brightest stars?

11. 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

12. 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

13. 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: _____

14. Did the object appear: *(Circle One)*: (a.) Solid b. Transparent c. Vapor d. Don't Know

15. 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 _____		

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

a. Sound N/STR

b. Color white

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.

N/A