

PROJECT 10073 RECORD

1. DATE - TIME GROUP 21 JUN 76 21/0315Z	2. LOCATION Jacksonville, Pennsylvania (1 Witness)
3. SOURCE Civilian	10. CONCLUSION INSUFFICIENT DATA FOR EVALUATION ✓
4. NUMBER OF OBJECTS Not Reported	
5. LENGTH OF OBSERVATION Not Reported	11. BRIEF SUMMARY AND ANALYSIS
6. TYPE OF OBSERVATION Ground-Visual	Request for completion of FTD Form 164 was made. Unable to contact addressee. Returned (NO SUCH ADDRESS).
7. COURSE SE	
8. PHOTOS ☐ Yes ☒ No	
9. PHYSICAL EVIDENCE ☐ Yes ☒ No	

U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object? _____ _____ _____ Day Month Year	2. Time of day: _____ 15 Hour Minutes (Circle One): A.M. or P.M.
3. Time Zone: (Circle One): a. Eastern b. Central c. Mountain d. Pacific e. Other _____ (Circle One): a. Daylight Saving b. Standard	
4. Where were you when you saw the object? _____ _____ _____ Nearest Postal Address City or Town 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? _____ 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:

12. The edges of the object were:

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

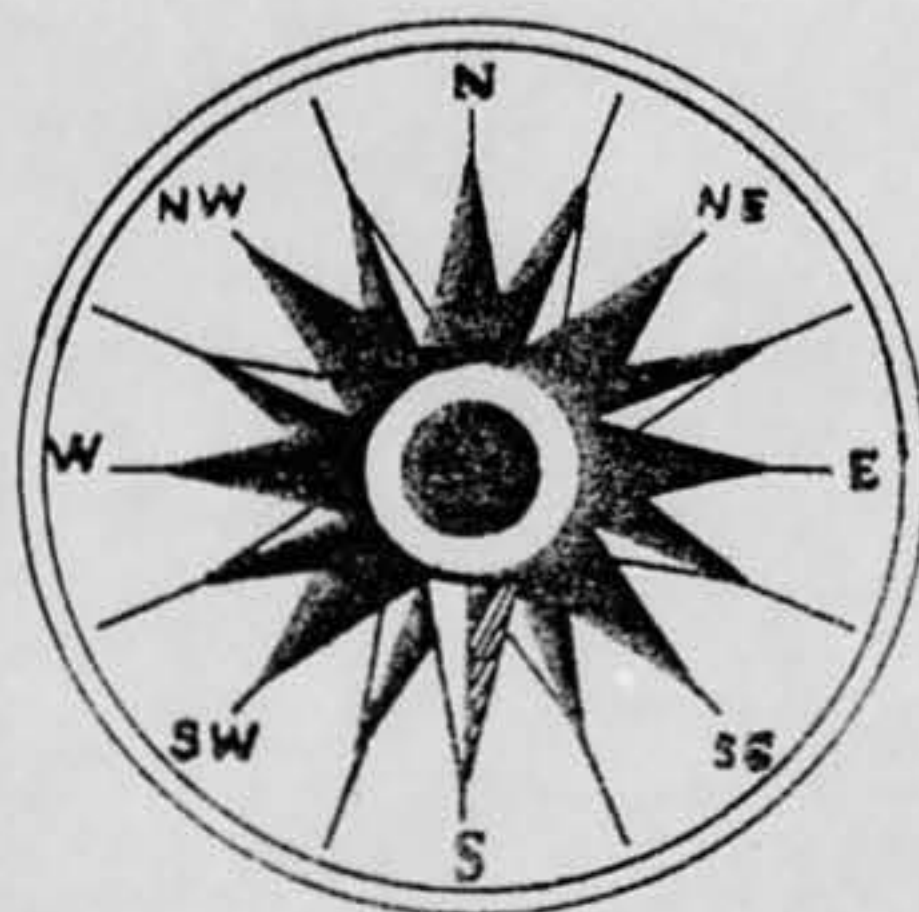
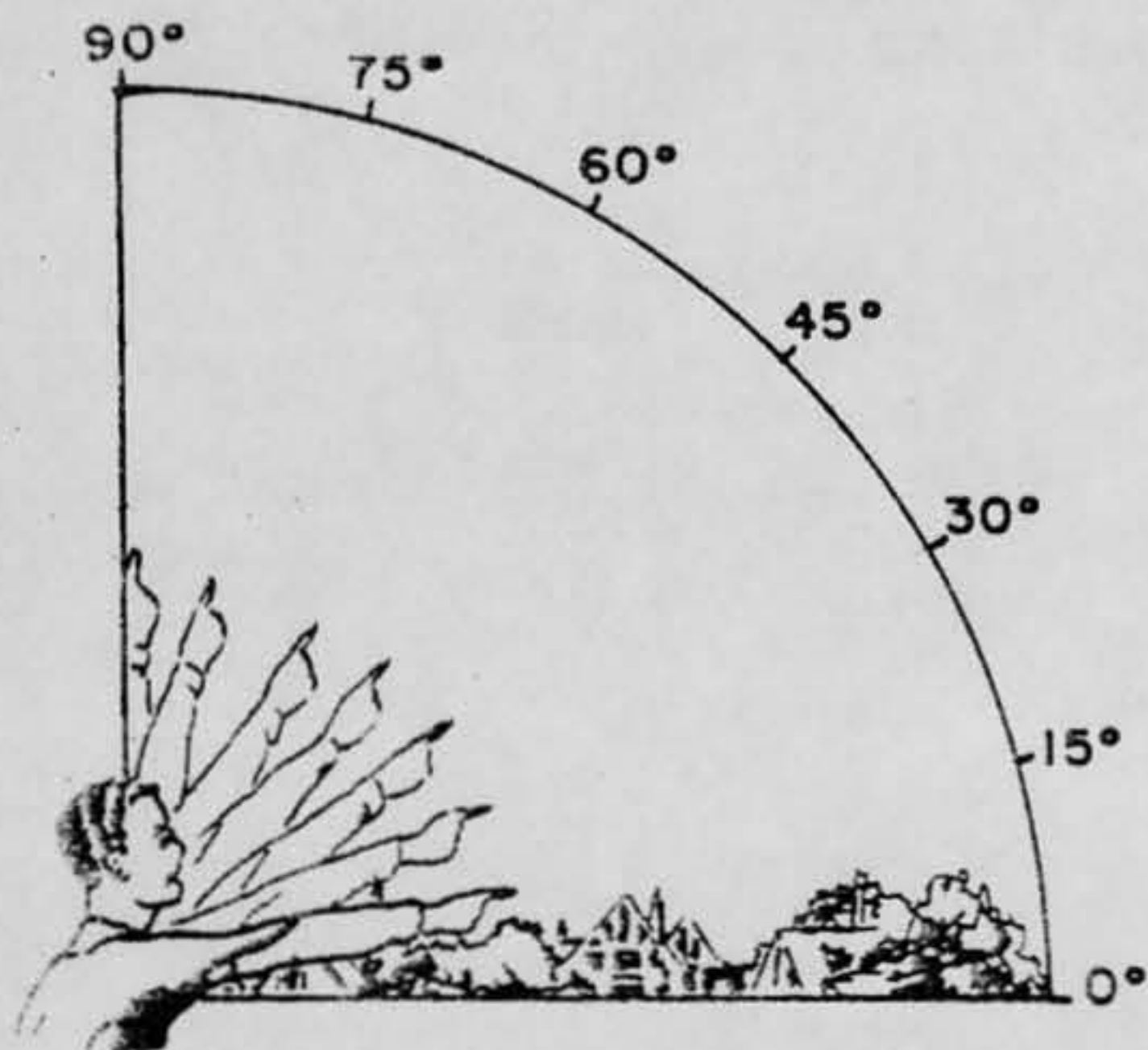
e. Other _____

13. Did the object:

(*Circle One* for each question)

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

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



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

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

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

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

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

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

NAME
Last Name First Name Middle Name

ADDRESS
Street City Zone State

TELEPHONE NUMBER AGE SEX

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

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

Day Month Year

Jacksonville, PA 2215(4)

25 JUN

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

[REDACTED]
[REDACTED]
Jacksonville, Pennsylvania

Dear Mr. [REDACTED]

Reference your recent unidentified observation which you reported to the Duty Officer at Wright-Patterson AFB, Ohio on 20 June 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,

W F M

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

POSTAGE AND FEES PAID

UNITED STATES AIR FORCE
OFFICIAL BUSINESS

AIR MAIL

Mr.

Jacksonville, Pennsylvania

FTD FORM
JUL 61 383

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



[Illegible handwritten notes]



1. NAME CHECKED
 Enclosures ... Return
 Unknown
 Confidential address
 Street, Left no address
 All work offices in state
 the last receipt in this envelope