

PROJECT 10073 RECORD

1. DATE - TIME GROUP 11 Apr 87 12/0200Z	2. LOCATION Kakida, Ohio	MULTIPLE
3. SOURCE Civilian	10. CONCLUSION Astr. (S/P) <i>Prob.</i>	<i>But large motion reported</i> <i>Jed</i>
4. NUMBER OF OBJECTS Uncertain		
5. LENGTH OF OBSERVATION Uncertain	11. BRIEF SUMMARY AND ANALYSIS	
6. TYPE OF OBSERVATION General Visual	Observer stated that the object appeared as a light and a solid. Object appeared to be brighter than the brightest star. Edges of object were sharply outlined. Moved behind a group of trees. Object had no noise. Color: red, green, blue and white.	
7. COURSE None Stated		
8. PHOTOS ☐ Yes ☒ No		
9. PHYSICAL EVIDENCE ☐ Yes ☒ No		

Mr. [REDACTED] of Kalamazoo, Ohio called at
16.12 local time. He stated that he was a reporter
for WIMA radio station and that he had reports
from 29 persons over a period of 5 nights on UFOs.
He wanted ~~some~~ someone in the VFO office to contact
him regarding these reports. He may be reached
at area code 414 Telephone number [REDACTED] between
the hours of 0800 and 1530 hours and at 532-3976
after those hours.

Dome + rounded

oval lights

Atch #1

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?

11 April 1967
Day Month Year

2. Time of day: 12:00

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?

Officer to Kaleda Blvd Kaleda Putnam, Ohio
Nearest Postal Address City or Town State or County

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

1
Hours

30
Minutes

Seconds

a. Certain

b. Fairly certain

c. Not very sure

d. Just a guess

5.1 How was time in sight determined? Clock

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:

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

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

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

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

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

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

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

a. Sound No Sound

b. Color Red, Blue, Yellow, & 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?

1/3

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



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? At first about same speed as the car - 40 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? _____

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

- a. Inside a building
b. In a car ☒ Both
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? 40 miles per hour.

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

(Circle One) Yes ☒ No ☐

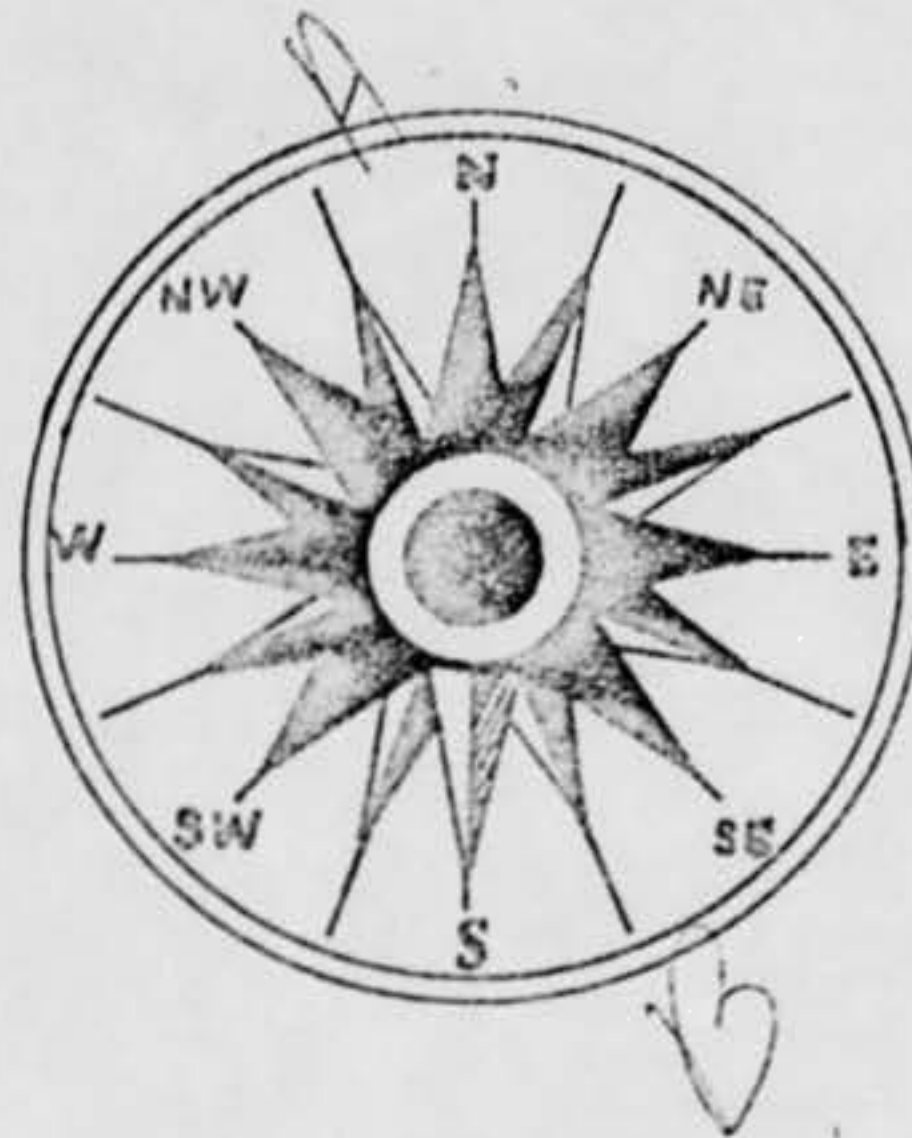
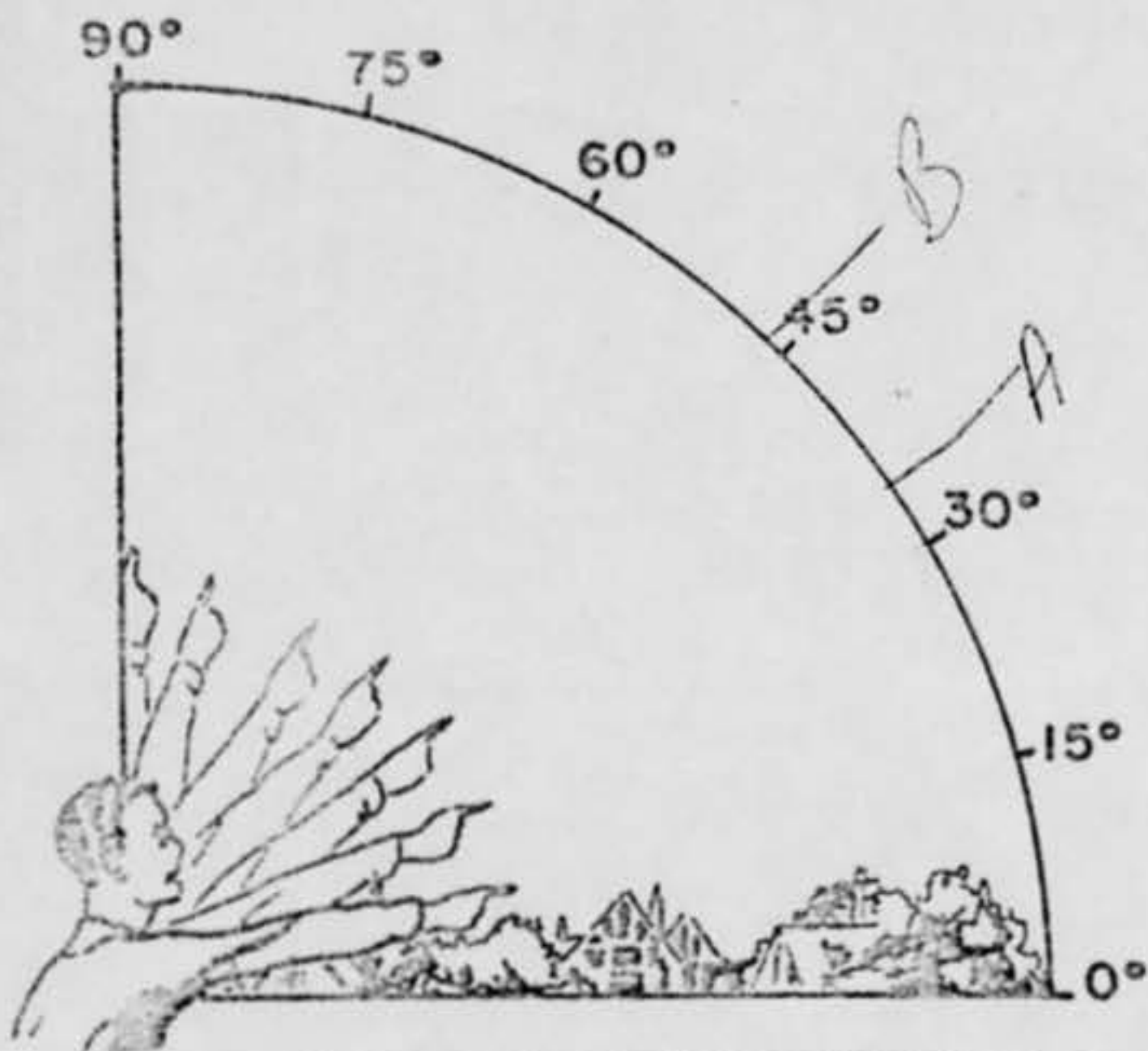
25. Did you observe the object through any of the following?

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

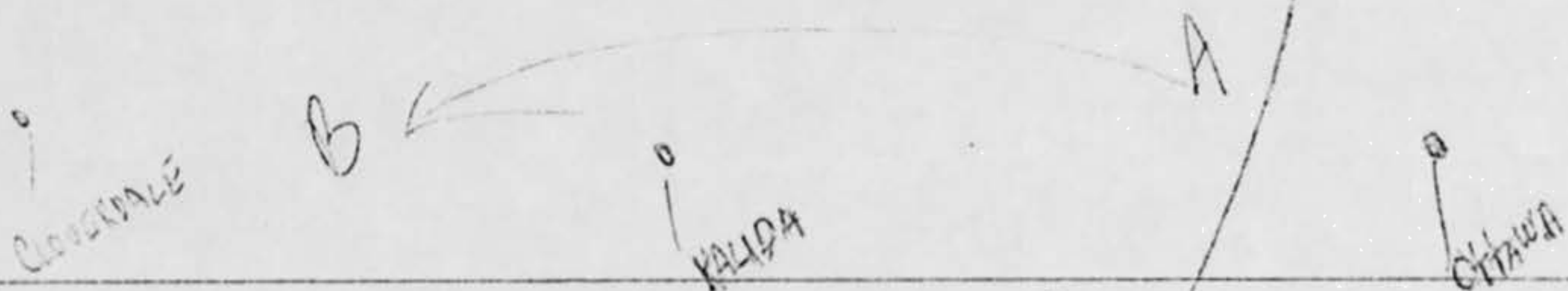
26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

A bright light with a yellowish glow
bright orange 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.



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? 0
Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

note - If object moved from Ottawa it couldn't have moved toward the south.
VPM.

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

Yes - in October, 1961

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] Kaleda, Ohio
[Redacted] Kaleda, Ohio
Mr. & Mrs. [Redacted] Kaleda, Ohio

32. Please give the following information about yourself:

NAME *[Redacted]* Last Name *[Redacted]* First Name *[Redacted]* Middle Name *[Redacted]*
 ADDRESS *[Redacted]* Street *Kaleda* City *Ohio* Zone *[Redacted]* State *Ohio*
 TELEPHONE NUMBER *[Redacted]* AGE *18* 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?

12/16 Day *April* Month *1961* Year

Police Sgt. Patterson (in Police Room)

34. Date you completed this questionnaire:

17th April 1967
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.

Object seen in October of 1966 - appeared as a bright light reflecting different colors.

Other objects were reported in Kalida before and after I saw it. They all fit the same description.

Astro (S/P)

*direction envelope to
containing clear copy*

11 Apr 67

DEPARTMENT OF THE AIR FORCE
HEADQUARTERS FOREIGN TECHNOLOGY DIVISION (AFSC)
WRIGHT-PATTERSON AIR FORCE BASE, OHIO 45433



REPLY TO
ATTN OF: TDET/UFO

14 April 1967

SUBJECT: UFO Observation , 11 Apr 67

11 April 67

Kalida, Ohio

TO:

[Redacted]

Kalida, Ohio 45853

0200Z

Reference your unidentified observation. The information which we have received is not sufficient for a scientific evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided. Thank you for reporting your observation to the Air Force.

JAMES C. MANATT, Colonel, USAF
Director of Technology and Subsystems

1 Atch
FTD Form 164 w/envelope

TDET/UFO OFFICIAL FILE COPY

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?

11 Day APRIL Month 1967 Year

2. Time of day: 10-11 PM

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?

FROM CITTOWA TO CLOVERDALE C. IN TRANSIT

Nearest Postal Address

City or Town

State or Country

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

MORE THAN AN HOUR
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:

MUCH BRIGHTER THAN STARS - STREETLIGHT

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

SAW AT DISTANCE
THOUGH

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: JUST A GROUP OF TREES

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 RED, (GREEN), BLUE, WHITE ONE AT A TIME

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.

OBJECT MOVED UP AND DOWN, TRANSVERSELY,
AND STOPPED MOTION COMPLETELY ✓

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? GOING AT A MAX

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 STOOD AND WATCHED

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? 40 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

b. Sun glasses

☒ Yes

☐ No

c. Windshield

☒ Yes

☐ No

d. Window glass

☒ Yes

☐ No

e. Binoculars

☒ Yes

☐ No

f. Telescope

☒ Yes

☐ No

g. Theodolite

☒ Yes

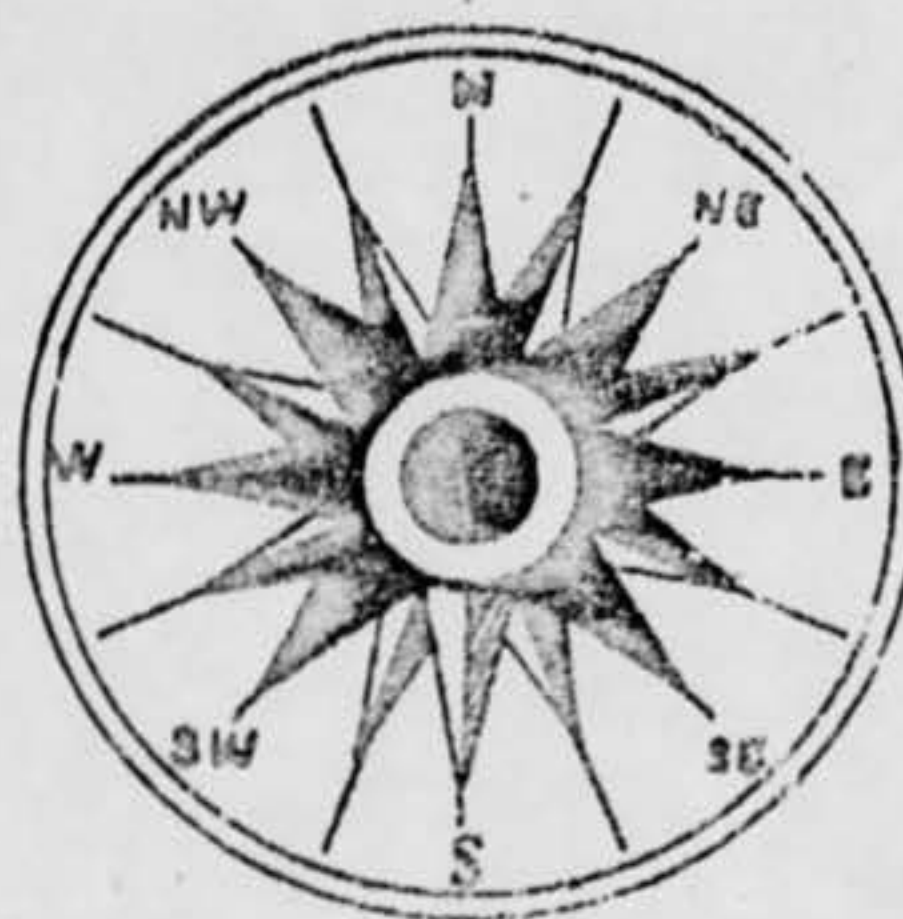
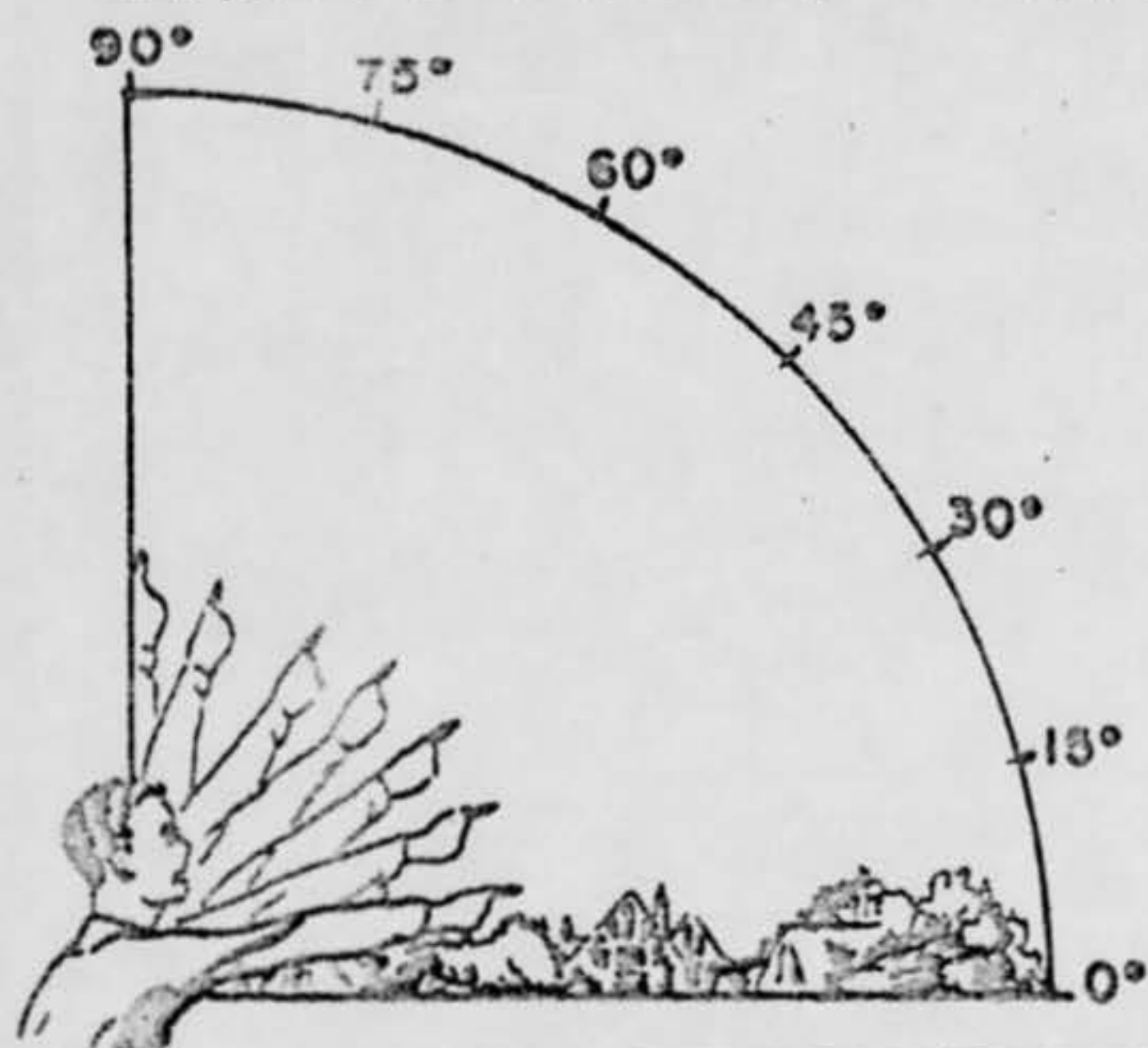
☐ No

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.

SAUCER WITH AN UPSIDE DOWN BOWL

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.

MAY HAVE BEEN TWO

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

OCTOBER 1966 11 AT NIGHT
OBSERVED ABOUT 15 MINUTES

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] (SISTER) MR. D [REDACTED]
 [REDACTED] Mrs. [REDACTED]
 [REDACTED] MISS [REDACTED]
 [REDACTED] [REDACTED]

32. Please give the following information about yourself:

NAME

Last Name

First Name

Middle Name

AD

Street

City

Zone

State

TELEPHONE NUMB

AGE

SEX

[REDACTED] [REDACTED] [REDACTED]
 [REDACTED] KALIDA OHIO
 [REDACTED] 18 F 45853

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?

12 APRIL 1967
 Day Month Year

LT. ROEBER, DUTY OFFICER

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.