

PROJECT 10073 RECORD CARD

1. DATE ✓ 7 Aug 52		2. LOCATION DAYTON, OHIO		CONCLUSIONS ☐ Was Balloon ☒ Probably Balloon ☐ Possibly Balloon	
3. DATE-TIME GROUP Local 07/1900 EST GMT 07/2100 Z		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 Woman		☐ Was Astronomical ☐ Probably Astronomical ☐ Possibly Astronomical	
7. LENGTH OF OBSERVATION		8. NUMBER OF OBJECTS 2	9. COURSE	☐ Other ☐ Insufficient Data for Evaluation ☐ Unknown	
10. BRIEF SUMMARY OF SIGHTING Civilian woman phoned in report of two discs shaped objects which were moving slowly rising.			11. COMMENTS 1. Inexact information.		

REPORT OF "UNIDENTIFIED AERIAL PHENOMENA"

At 20:25 a woman called to report the sighting of "Unidentified Aerial Phenomena" Advised her that while she did not have to identify herself, it would help us if she would do so. She then gave her name as "Mrs. [REDACTED]", address [REDACTED], Dayton.

She stated that at approximately 19:00 she heard her son, who was playing in the yard, call telling her to come look at something in the air. She went out in the yard, her father-in-law also going out. At first she saw nothing, but then in the southeast she noted two "disc shaped" objects. Objects were oval in shape, moving slowly, on a rising path. After a brief period of time they disappeared. Attached form will provide a few of the standard answers.

As something over an hour had passed since observing objects, due to trying to decide whether to report them, then trying to find out how to report them she was not as sure of various identifying data as was necessary. Her information was inexact, she had great difficulty trying to describe objects as to size height, color, speed, etc.

It was still daylight at the time of sighting, yet they saw the objects reasonably clearly. She therefore assumed it had some light or glow in connection with it. Asked if any familiar fixed objects were within her field of vision at the time with which she could compare objects she said no. There were no clouds in the immediate vicinity of the objects, tho some appeared shortly thereafter.

Feeling that further questioning on my part gave promise of little return, I terminated conversation. Then checked the phone book to see if anyone by given name was listed at given address. There was [REDACTED] listed in the phone book. I called the number listed and verified the fact that the woman at this residence had in fact been the person who called.

C. O. Spencer Capt USAF.
Duty Officer

7-3719-10

(Oval Shaped)

TENTATIVE
OBSERVERS QUESTIONNAIRE

Mrs [REDACTED]
[REDACTED]

SECTION A

1. When did you see the object:

1.1 Date: 7 August 1952
Day Month Year

1.2 Time of day: 19:00 — A.M. or P.M. (Circle One)
Hrs. Min.

1.3 Time Zone: (Circle One):

a. Eastern
b. Central
c. Mountain

d. Pacific
e. Other _____

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

1.4 Circle one of the following to indicate how certain you are of your answer to the above question 1.2:

a. Certain
b. Fairly certain

c. Not very sure
d. Just a guess

2. Where did you see the object?

[REDACTED] Dayton Ohio USA
Postal Address City or Town State Country

3. Where were you located when you saw the object:

(Circle One): a. Inside a building
b. In a car
c. Outdoors in yard

d. In an airplane
e. At sea
f. Other _____

3.1 Were you:

son P2 saw first

(Circle One): a. In the business section of a city?
b. In the residential section of a city?
c. In open countryside?
d. Flying near an airfield?
e. Flying over a city?
f. Flying over open country?
g. Other _____

Her Father-in-law
X son also saw
objects

4. How did you happen to notice the object?

Son called her
from yard.

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

7 Month Year
Day

SECTION B

6. What were you doing at the time you saw the object?

6.1 What had you been doing for the 30 minutes before you saw the object? Try to list the activity or activities, and the approximate amount of time spent on each.

Seemed to be dark & were bright.
then disappeared

7. Were you moving at any time while you saw the object? (Circle One):

Yes or No.

If you answered YES, then complete the following questions.

7.1 What direction were objects moving?

(Circle One):

a. North

b. Northeast

c. East

d. Southeast

e. South

f. Southwest

g. West

h. Northwest

7.2 How fast were objects moving? _____ miles per hour.

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

(Circle One): Yes or No

2 or 3
shaped
objects

moving slightly

during day
light

Not asked
about 6x10 inches
nothing
to compare
sizes
seemed quite
size

8. What direction were you facing when you first saw the object?

- (Circle One):
- | | |
|--|--------------|
| a. North | e. South |
| b. Northeast | f. Southwest |
| c. East | g. West |
| ☒ d. Southeast | h. Northwest |

8.1 What direction were you facing when the object disappeared?

- (Circle One):
- | | |
|--|--------------|
| a. North | e. South |
| b. Northeast | f. Southwest |
| c. East | g. West |
| ☒ d. Southeast | h. Northwest |

8.2 Circle one of the following to indicate how certain you are of your answer to the above two questions. (8 and 8.1).

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

9. Were you wearing eye glasses when you saw the object? (Circle One):

Yes or No

10. How was the object seen?

- (Circle One):
- | | |
|-------------------------|---|
| a. Through window glass | e. Through theodolite |
| b. Through windshield | f. Through sun glasses |
| c. Through binoculars | g. Through open space |
| d. Through telescope | ☒ h. Other <u>No aids.</u> |

11. What do you remember about the weather conditions at the time you saw the object?

11.1 CLOUDS (Circle One)

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

11.2 WIND (Circle One)

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

11.3 WEATHER (Circle One)

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

11.4 TEMPERATURE (Circle One)

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

SECTION C

12. Estimate how long you saw the object?

Hours

Minutes

few
Seconds

12.1 Circle one of the following to indicate how certain you are of your answer to Question 12:

a. Certain

b. Fairly sure

c. Not very sure

d. Just a guess

13. Did the object look: (Circle One) Solid or Transparent?

14. Did the object at any time:

a few
(Circle One for each question)

14.1	Change direction?	<u>Yes</u>	<u>No</u> ✓	<u>Don't know</u>
14.2	Change speed?	<u>Yes</u>	<u>No</u> ✓	<u>Don't know</u>
14.3	Change size?	<u>Yes</u>	<u>No</u> ✓	<u>Don't know</u>
14.4	Change color?	<u>Yes</u>	<u>No</u> ✓	<u>Don't know</u>
14.5	Break up into parts or explode?	<u>Yes</u>	<u>No</u> ✓	<u>Don't know</u>
14.6	Give off smoke?	<u>Yes</u>	<u>No</u>	<u>Don't know</u> ✓
14.7	Change brightness?	<u>Yes</u>	<u>No</u>	<u>Don't know</u> ✓
14.8	Flicker, throb, or pulsate?	<u>Yes</u>	<u>No</u>	<u>Don't know</u> ✓
14.9	Remain motionless?	<u>Yes</u>	<u>No</u> ✓	<u>Don't know</u> ✓

15. Did the object give off a light? (Circle One): Yes No Don't know

15.1 IF you answered YES, what was the color of the light? _____

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

16.1 Sound none

16.2 Color _____

17. 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 they were traveling.

18. Did the object at any time:

18.1 Move behind something? (Circle One) Yes No Don't know

IF you answered YES, then tell what it moved behind.

18.2 Move in front of something? (Circle One) Yes No Don't know

IF you answered YES, then tell what it moved in front of.

18.3 Blend with the background? (Circle One) Yes No Don't know

19. Which of the following objects is about the same actual size as the object you saw? (Circle One):

- | | |
|----------------------|-------------------|
| a. Pea | f. Automobile |
| b. Baseball | g. Small airplane |
| <u>c. Basketball</u> | h. Large airplane |
| d. Bicycle wheel | i. Dirigible |
| e. Office desk | j. Other _____ |

19.1 Circle one of the following to indicate how certain you are of your answer to Question 19.

- | | |
|--------------------------|------------------|
| a. Certain | c. Not very sure |
| <u>b. Fairly certain</u> | d. Uncertain |

20. Try to tell the following things about the object:

- 20.1 How high above the earth was it? unable to estimate feet.
- 20.2 How far was it from you? unable to estimate feet or _____ miles
- 20.3 How fast was it going? as above miles per hour.
- 20.4 Circle one of the following to indicate how certain you are of your answer to the above questions:

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

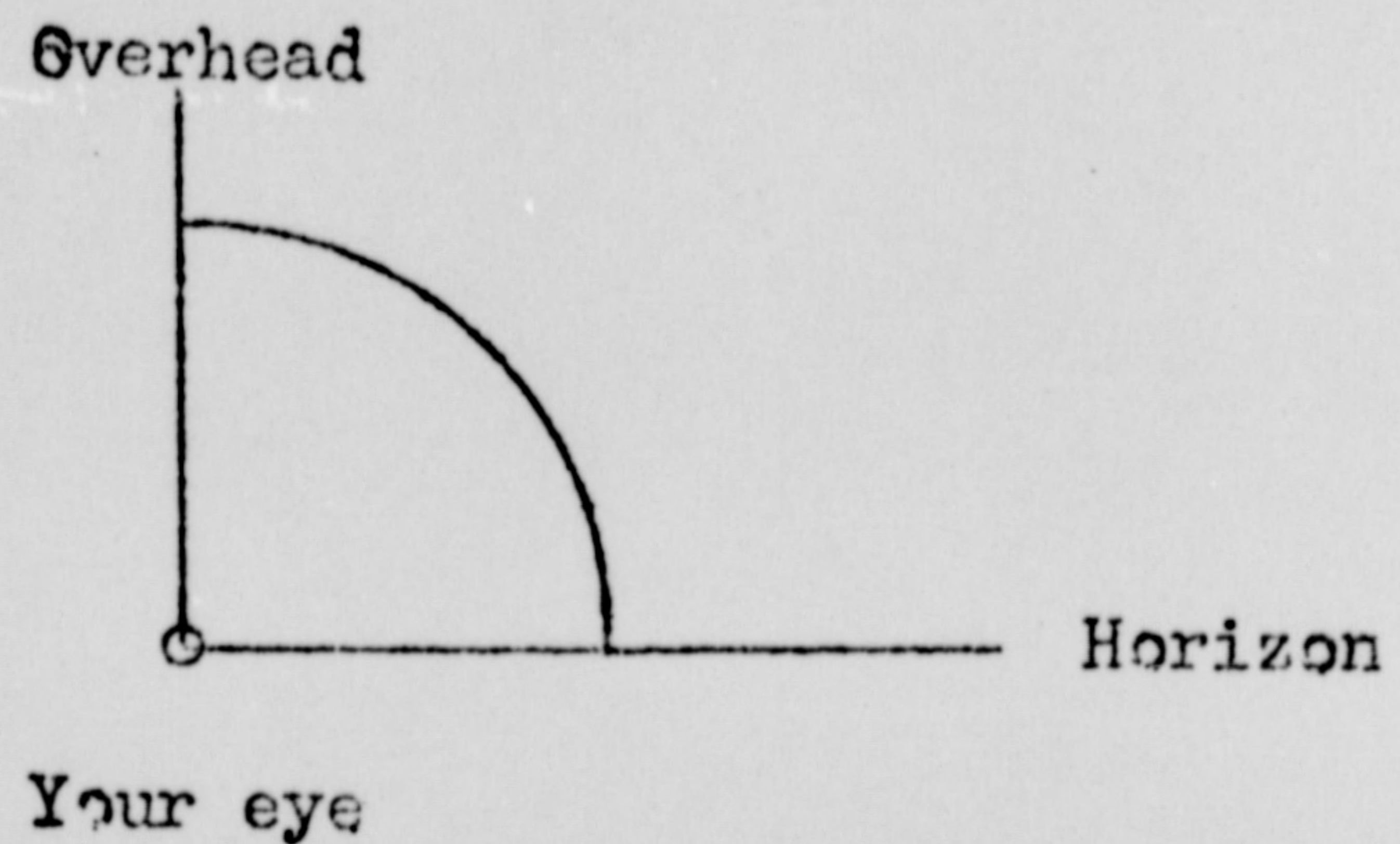
21. How did the object disappear from view?

- (Circle One): a. Suddenly c. Other _____
- b. Gradually d. Don't remember

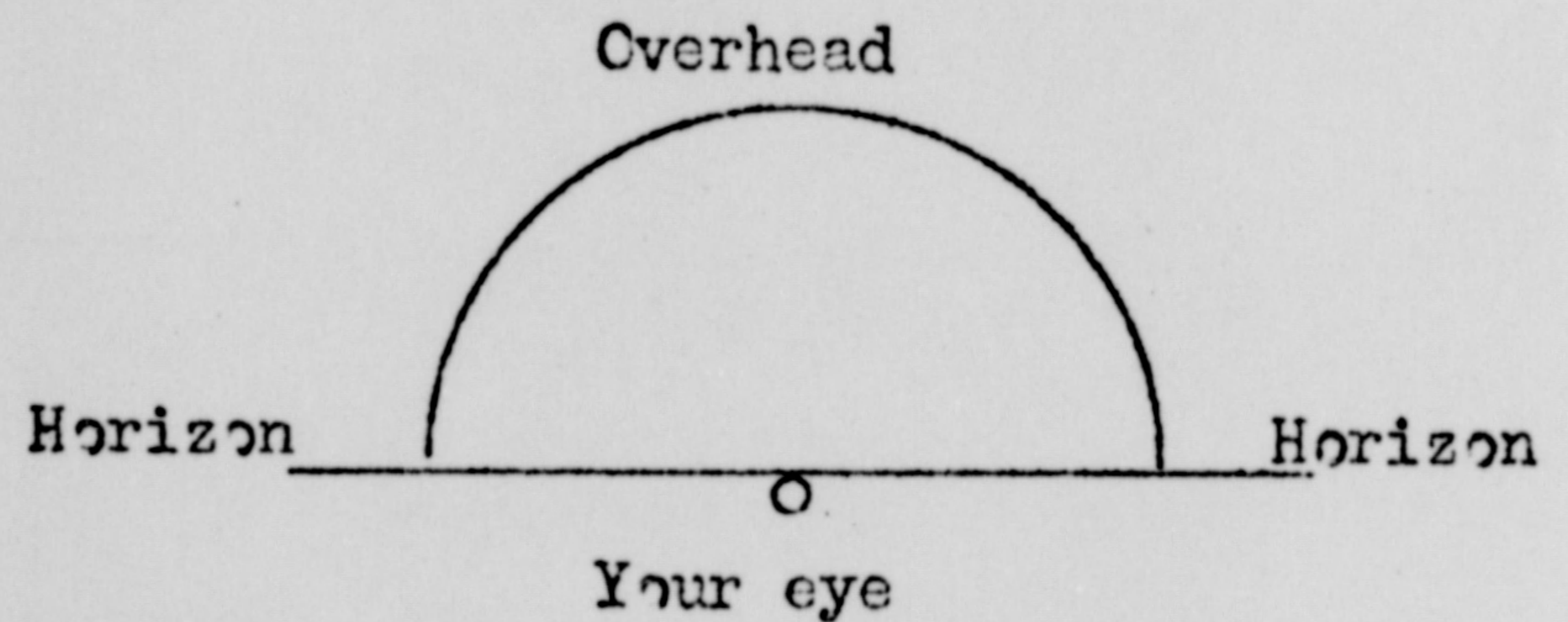
Did not attempt to
by plane. she stated it was
well above horizon

SECTION D

22. In the following sketch, imagine your eye at the point shown. Place an "A" on the curved line to show how high the object was above the horizon when you first saw it. Place a "B" to show where it was when you last saw it.



23. In the following 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.



24. Draw a picture that will show the motion that the object made. Place an "A" at the beginning of its path and a "B" at the end of its path.

25. Draw a picture that will show the shape of the object. Label and include in your sketch any details of the object that you saw, and place an arrow beside the drawing to show the direction the object was moving.

SECTION E

26. Was this the first time that you have seen an object like this?
(Circle One): Yes No

26.1 If you answered NO, then when, where, and under what conditions did you see other ones? _____

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

No opinion

28. Give the following information about yourself:

NAME

Last Name

First Name

Middle Name

ADDRESS

Street

City

Zone

State

TELEPHONE NUMBER

What is your present job?

Age

Sex

Female

Last School Attended

Year of last attendance at this school

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

(Circle One): Yes or No

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

(Circle One): Yes or No

29.2 Please list their names and addresses:

Father-in-law

Son.

30. Please add here any further comments which you believe are important.
Use additional sheets of the same size paper if necessary.