HENRY, Geneva

PROJECT 10073 RECORD CARD

1. DATE 6 Jun 60	2. LOCATION Dayton, Ohio	12. CONCLUSIONS ☐ Was Balloon ☐ Probably Balloon ☐ Possibly Balloon ☐ Was Aircraft ☐ Probably Aircraft ☐ Possibly Aircraft ☒ Was Astronomical Meteor ☐ Probably Astronomical ☐ Possibly Astronomical ☐ Other_____ ☐ Insufficient Data for Evaluation ☐ Unknown
3. DATE-TIME GROUP Local 0115 - 0130 GMT 06/0615Z	4. TYPE OF OBSERVATION ☒ Ground-Visual ☐ Ground-Radar ☐ Air-Visual ☐ Air-Intercept Radar	
5. PHOTOS ☐ Yes ☒ No	6. SOURCE Civilian	
7. LENGTH OF OBSERVATION 1 sec	8. NUMBER OF OBJECTS one	9. COURSE descending

10. BRIEF SUMMARY OF SIGHTING

A bright bluish-green glow appeared in the NE, moving toward the witness while it fell at an angle. Witness stated it was just like a shooting star, but different than any she had seen. Object disappeared behind trees.

11. COMMENTS

The description is typical of a meteor at high altitude.

ATIC FORM 329 (REV 26 SEP 52)

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?

6 (Day) June (Month) 60 (Year)

2. Time of day: 0115 - 0130 (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] (Nearest Postal Address) DAYTON (City or Town) OHIO (State or Country)

Additional remarks: _____

5. Estimate how long you saw the object. _____ Hours _____ Minutes 1 Seconds

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

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

6. What was the condition of the sky?

(Circle One): a. Bright daylight
b. Dull daylight
c. Bright twilight
d. Just a trace of daylight
(e.) No trace of daylight
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
b. In back of you
c. To your right
d. To your left
e. Overhead
f. Don't remember

ATIC FORM NO. 164 (13 OCT 54)

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? Bright light
d. Several yards away?
e. Other

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. Flicker, throb, or pulsate?	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: tree ?

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, than tell what it moved in front of: _____

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

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

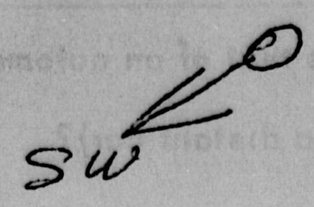
a. Eyeglasses	Yes	No	e. Binoculars	Yes	No
b. Sun glasses	Yes	No	f. Telescope	Yes	No
c. Windshield	Yes	No	g. Theodolite	Yes	No
d. Window ~~glass~~ screen	Yes	No	h. Other _____		

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

a. Sound no

b. Color Bluish - green glow

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.



appeared to be moving toward observer from the NE at approx 45° angle

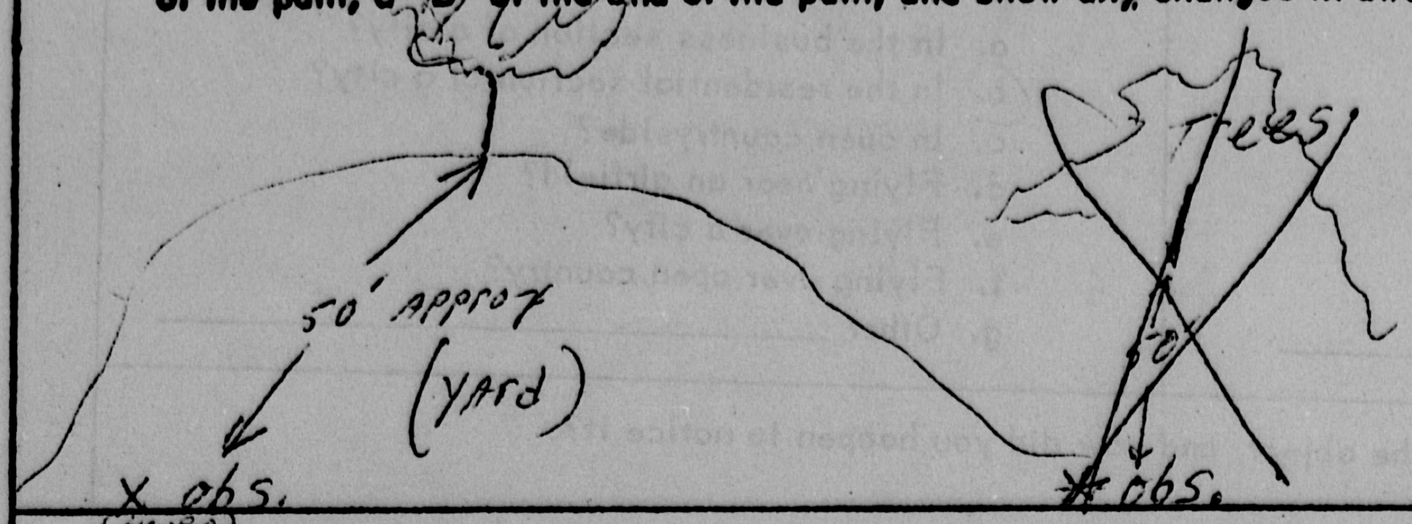
18. The edges of the object were:

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

e. Other Just a bright glow

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.
_____ 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? Behind Trees

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.

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
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. Flying 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?

Closing window

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

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

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

31.1 When it first appeared:

a. From true North 45 degrees.
b. From horizon 40 degrees.

31.2 When it disappeared:

a. From true North 45 degrees.
b. From horizon below trees degrees.

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?

6 (Day) June (Month) 1960 (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? _____ 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? _____ feet.

41. Please give the following information about yourself:

NAME [redacted]
Last Name First Name Middle Name

ADDRE[redacted] OHIO
Street City Zone State

TELEPHONE NUMBE[redacted]

What is your present job? Housewife

Age _____ Sex F

Please indicate any special educational training that you have had.

a. Grade school _____
b. High school _____
c. College _____
d. Post graduate _____
e. e. Technical school _____
(Type) _____
f. Other special training _____

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

The specimen was determined to be composed of ferrous material formed by burning, such as a trash pile fire. It definitely is not material which came from outer space.

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 _____
(Please Print)

SIGNATURE _____

DATE _____

(Do Not Write in This Space)

CODE:

Witness stated that she was about to close a window on the north side of the house when a bright bluish-green glow ~~flashed~~ appeared in the NE. The light appeared to be moving toward the witness while it fell at an angle. Witness said it was just like a shooting star but different than any she has seen.

After the object disappeared beyond the trees the witness walked out to where the object appeared to fall. The ground where it was thought that the object had fallen was freshly spaded. The only thing she found was something similar to burnt charcoal, and was turned over to the investigator.