PROJECT 10073 RECORD CARD

1. DATE 25 Jul 62	Silver Grove.	Kentucky	0	CONCLUSIONS Was Balloon Probably Balloon
3. DATE-TIME GROUP Local 01277 GMT 25/06277	4 TYPE OF OBSERVATIO Ground-Visual Air-Visual			Possibly Balloon Was Aircraft Probably Aircraft Possibly Aircraft
5. PHOTOS O Yes XII No	6. SOURCE Civilian			Was Astronomical Probably Astronomical Passibly Astronomical
7. LENGTH OF OBSERVATION	8. NUMBER OF OBJECTS	9. COURSE	000	OtherInsufficient Data for Evaluation Unknown
red. No sound. On	ball changing to appeared fm true of many horizon todgr of N, 15dgr			s of a/c sighting.

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? 1962 1962 Bay Month Year	2. Time of day: 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?	
Negrest 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 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	d. To your left
b. In back of you	e. Overhead
c. To your right	f. Don't remember

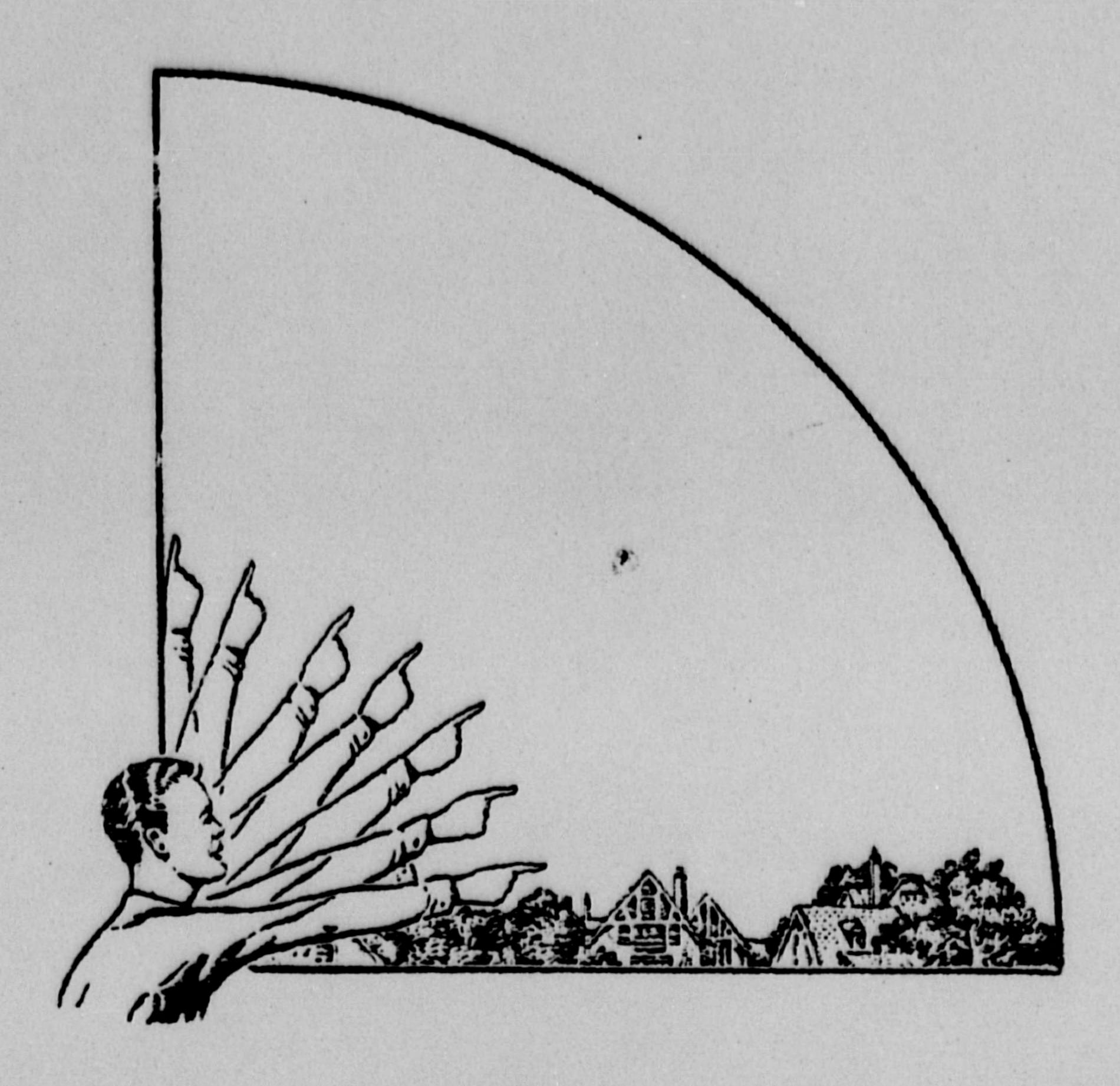
8.	IF you saw the object at NIGHT, what did you notice.	concerning the STARS and MOON?
	8.1 STARS (Circle One): 8.	2 MOON (Circle One):
	a. None	(a.) Bright moonlight
	b. A few	Bright moonlight b. Dull moonlight
	(C) Many	c. No moonlight — pitch dark
	d. Don't remember	d. Don't remember
9.	The object 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 brigh	itest:stars?
	avor	dasheart
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, par	rticularly a cloud?
	(Circle One): Yes No Don't K	
	(Circle One): Yes No Don't K it moved behind:	now. iF you answered YES, then tell what
	it moved bening:	
13.	Did the object move in front of something at any time,	particularly a cloud?
	(Circle One): Yes (No) Don't K	now. 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
	ord me object appear: (Circle One). (a., oone	D. HOLLSPORT C. TOPOLE C. DOILLING
15.	Did you observe the object through any of the following	19?
	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 1/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2

	Tell in a few word	1//		
	b. Color		-1, P.A	
	of the object:that	you:saw:such as wings, prote	object or objects. Label and include in your sketch any drusions, etc., and especially exhaust trails or vapor trails, edirection the object:was moving.	
			1.15 m. 19.00	
18.	The edges of the c	object were:		
18.	(Circle One):	 a. Fuzzy or blurred b. Like a bright star c. Sharply outlined 	e. Other	
	(Circle One):	 a. Fuzzy or blurred b. Like a bright star c. Sharply outlined d. Don't remember 		
	(Circle One): IF there was MOR	a. Fuzzy or blurred b. Like a bright star c. Sharply outlined d. Don't remember E THAN ONE object, then h		19.
	(Circle One): IF there was MOR	a. Fuzzy or blurred b. Like a bright star c. Sharply outlined d. Don't remember E THAN ONE object, then h	how many were there?	
	(Circle One): IF there was MOR	a. Fuzzy or blurred b. Like a bright star c. Sharply outlined d. Don't remember E THAN ONE object, then h	how many were there? d put an arrow to show the direction that they were traveling	
	(Circle One): IF there was MOR	a. Fuzzy or blurred b. Like a bright star c. Sharply outlined d. Don't remember E THAN ONE object, then h	how many were there? d put an arrow to show the direction that they were traveling	ng.
	(Circle One): IF there was MOR	a. Fuzzy or blurred b. Like a bright star c. Sharply outlined d. Don't remember E THAN ONE object, then h	how many were there? d put an arrow to show the direction that they were traveling	ng.

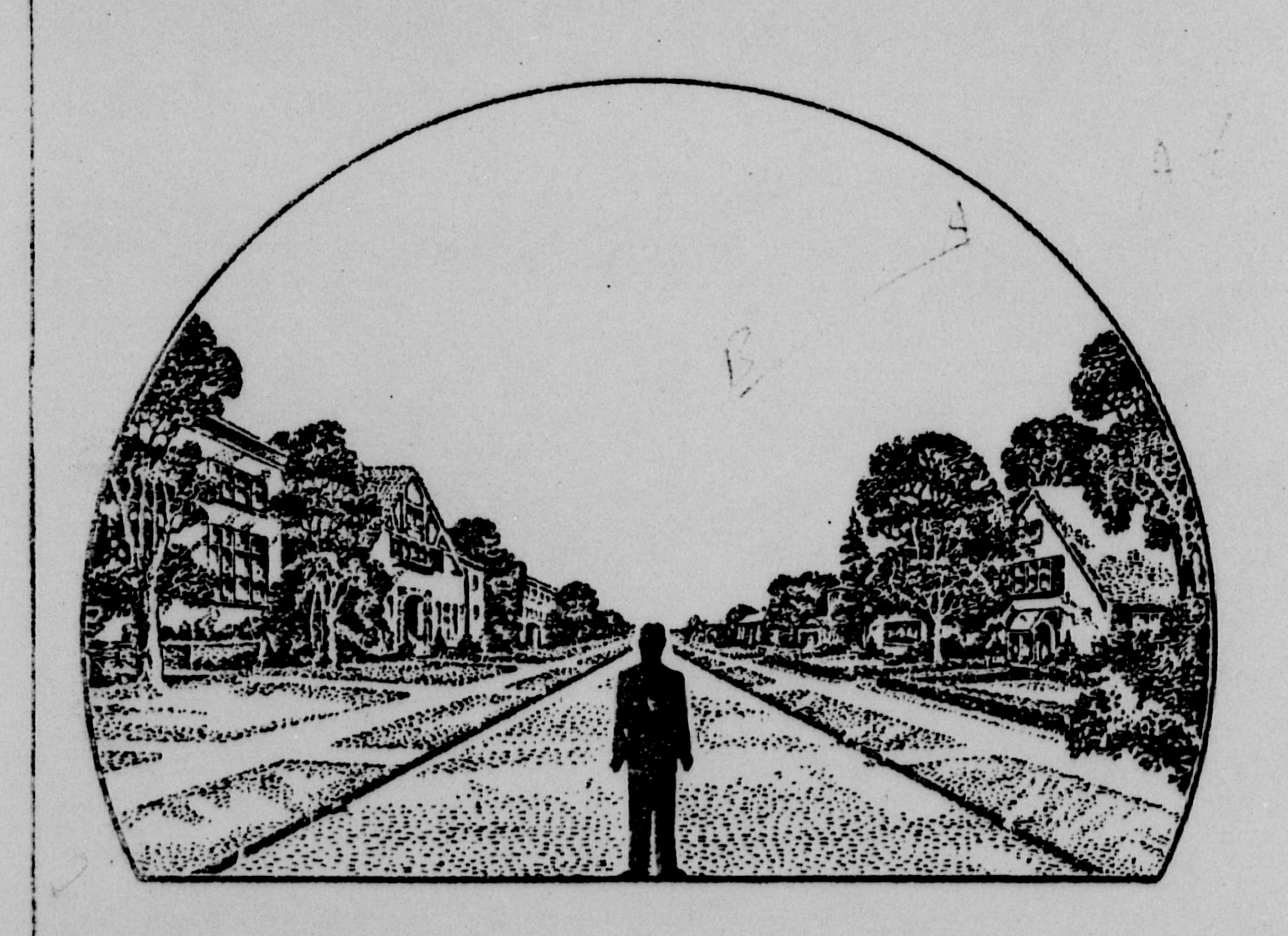
	the path, a "B" at the end of the path, and show any changes in direction during the course.
	N
•	How large did the object appear to you as compared to an object with which you are familiar?
	Like Kenned Star Star Star
•	We wish to know the angular size. Hold a match stick at arm's length in line with 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?
	all_{n}
	Did the object disappear while you were watching it? If so, how?
	yes. Sky.
	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.

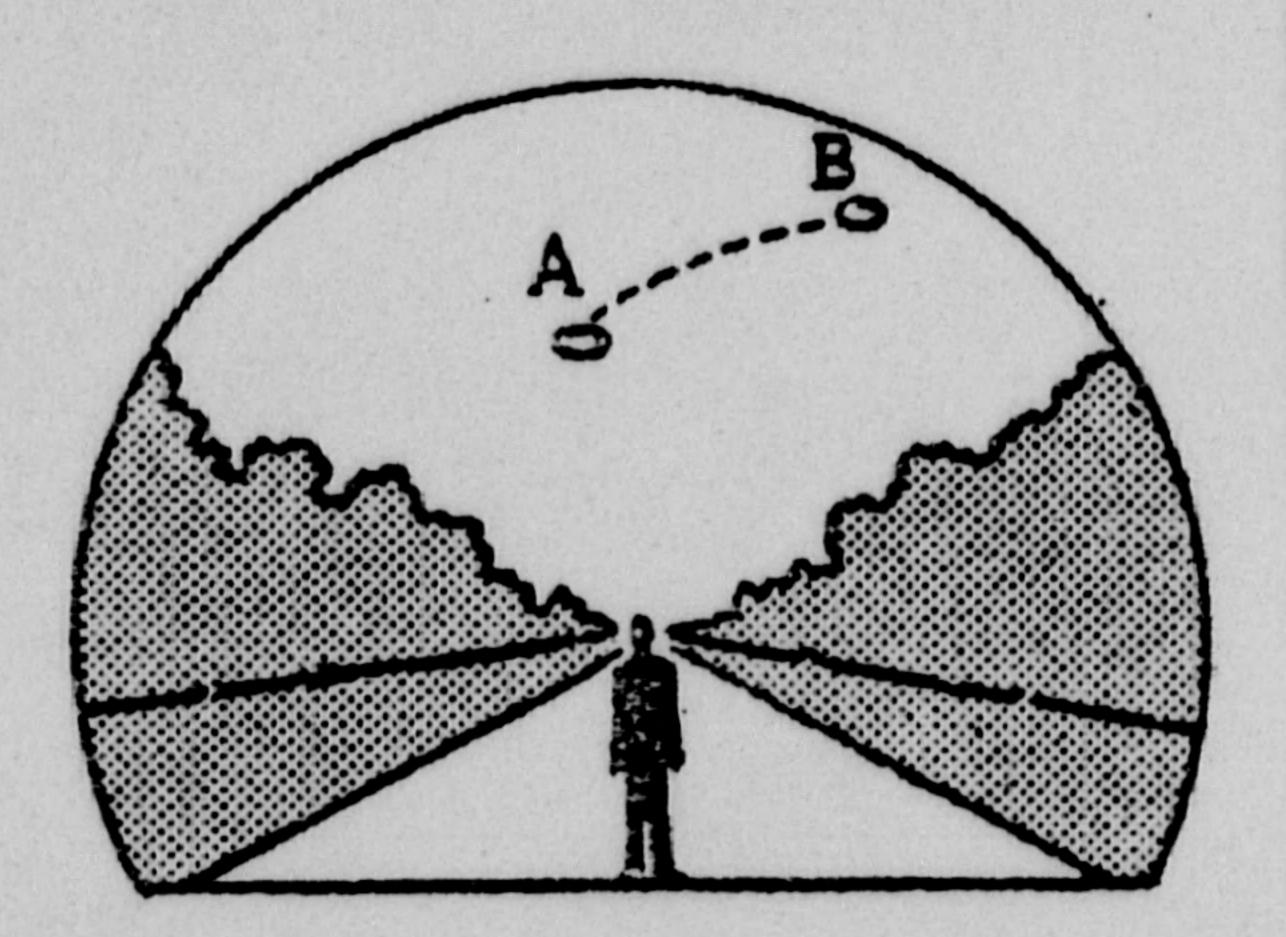
	Where were you located when you saw the object? (Circle One): a. Inside a building b. In a car c. Outdoors d. In an airplane (type) e. At sea f. Other What were you doing at the time you saw the object,	a. In the business section of a city? b. In the residential section of a city? c. In open countryside? d. Near an airfield? e. Flying over a city? f. Flying over open country? g. Other
28.	28.1 What direction were you moving? (Circle On	
	a. North b. Northeast d. Southeast	e. South f. Southwest h. Northwest
	28.2 How fast were you moving?	
	28.3 Did you stop at any time while you were look (Circle One) Yes No	king at the object?
29.	What direction were you looking when you first saw	the object? (Circle One) g. West
	a. North c. East	a. South h. Northwest
	b. Northeast d. Southeast	f. Southwest i. Overhead
30.	What direction were you looking when you last saw	the object? (Circle One) g. West
	a. North c. East	e. South h. Northwest
	b. Northeast d. Southeast	f. Southwest i. Overhead
	If you are familiar with bearing terms (angular direction true North (thru east) and also the number of de	tion), try to estimate the number of degrees the object was
	31.1 When it first appeared:	
	a. From true Northdegrees.	
	b. From horizondegrees.	
	31.2 When it disappeared:	
	a. From true North degrees.	
	b. From horizondegrees.	

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.





circle One) ky ed:clouds or heavy clouds	6. 6. 6.	Dry Fog, mist, or light rain Moderate or heavy rain Snow Don't remember	
ed:clouds or heavy clouds	· c.	Moderate or heavy rain Snow	
or heavy clouds	· c.	Moderate or heavy rain Snow	
or heavy clouds	· c.	Moderate or heavy rain Snow	
o whom did you report		Don't remember	
o whom did you renor			
	that you had seen the	object?	
		1:27	
/ Mont	Year		
e else with you at the	time you saw the -t.		
Yes Yes	No		
ou answered YES. did	they see the object to	97	
cle One) Yes	No		
Their names and	G GGGF83585:		
A STATE OF THE STA			
	about the state of	A CONTRACTOR OF THE PARTY OF TH	
e first time that you h	nad seen an object or	objects like this?	
rcie One) Yes	No		
u answered NO .b.	when where and!	er what circumeters it i	
	and und	Circomstances ald you	Joe orner ones?
	e else with you at the cle One) Yes ou answered YES, did cle One) Yes se list their names and rele One) Yes ou answered NO, then	e else with you at the time you saw the object of the One) Yes No Ou answered YES, did they see the object to ocle One) Yes No se list their names and addresses: The first time that you had seen an object or occercie One) Yes No Ou answered NO, then when, where, and under Out answered NO, then when, where, and under	e else with you at the time you saw the object? cle One) Yes No ou answered YES, did they see the object too? cle One) Yes No se list their names and addresses: ne first time that you had seen an object or objects like this?

39. Do you think you can estimate the speed of the object?	
(Circle One) Yes · No	
(Circle One) Yes No IF you answered YES, then what speed would you estimate	10? A North months to the contraction of the contra
40. Do you think you can estimate how far away from you the	
(Circle One) (Pes) No	
IF you answered YES, then how far away would you say	11 was? 4. 1/2 11 (2)
41. Please give the following information about yourself:	
NAME	First Name / Middle Name
ADPPEC Sireet.	City Zone State
TELEPHONE	
TELEPHON	
Age_/5 Sex_/^/	
indicate any additional information about yourself, included the second	ding any education, which might be pertinent.
Hegi-run	
42. Date you completed this questionnaire:	Day Month Year
42. Date you completed this questionnaire:	Day Month Year