PROJECT 10073 RECORD CARD

1. DATE 1. March, 1964	2. LOCATION Beavercreek, Onic	12. CONCLUSIONS D Was Balloon Probably Balloon
3. DATE-TIME GROUP Local 2100 GMT 05/02002	4. TYPE OF OBSERVATION — 2000 Ground-Visual Ground-Ra — Air-Visual Air-Interce	D Possibly Balloon Was Aircraft Probably Aircraft
5. PHOTOS O Y • • • • • • • • • • • • • • • • • •	6. SOURCE Civilian	D Probably Astronomical D Possibly Astronomical
7. LENGTH OF OBSERVATION 5 minutes	one Stations	Other Insufficient Data for Evaluation Unknown
	s nights. Object described low twent out.	nus in reported position only ver and setting at time of ghting. Object viewed on previous this. Case evaluated as Venus.
Observation on previou	s nights. Object described low twent out.	ver and setting at time of ghting. Object viewed on previous

6 Mar 1964

Dayton, Chio 45432

Dear Mr (1985)

Additional information is essential for evaluation of your sighting. Would you please complete the inclosed form and return it to Hq FTD (TDEW), in the envelope provided.

Thank you for reporting this unknown object to the Air Force.

Sincerely,

HECTOR QUINTANILLA, Jr Captain, USAF Chief, Aerial Phenomena Branch

- A called in Le observed the same thing that he called in about the evening of the 4th Wid not want to repeat FTD Form 164, as all data was the same.

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.

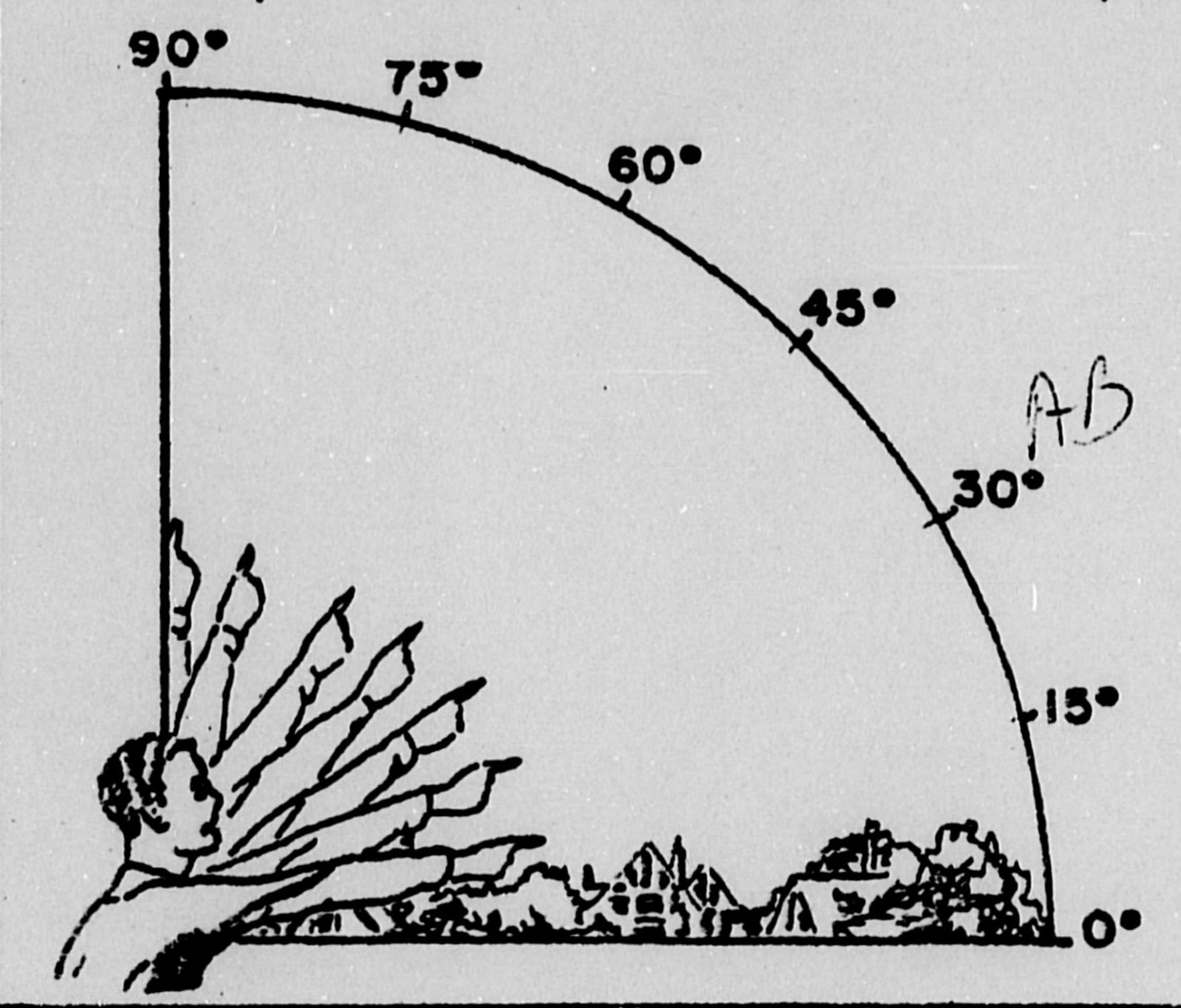
1. When did you see the object? 4 MARCA 1964 Day Month Year	2. Time of day: 2 (Circle One):	A.M. or P.M.
3. Time Zone: (Circle One): (a. Eastern b. Central c. Mountain d. Pacific e. Other	(Circle One): a.	Daylight Saving Standard
4. Where were you when you saw the object?		
12/4/14 10 + N. 35	DAY TUR	7h10
Negrest Postal Address	City or Town	State or County
5. How long was object in sight? (Total Duration) a. Certain b. Fairly certain 5.1 How was time in sight determined? 5.2 Was object in sight continuously? Ye	Hours Minutes c. Not very sure d. Just a guess h. Atch	Seconds
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 (Circle One): a. In front of you b. In back of you c. To your right	was the SUN located as you I d. To your left e. Overhead f. Don't remember	ocked at the object?

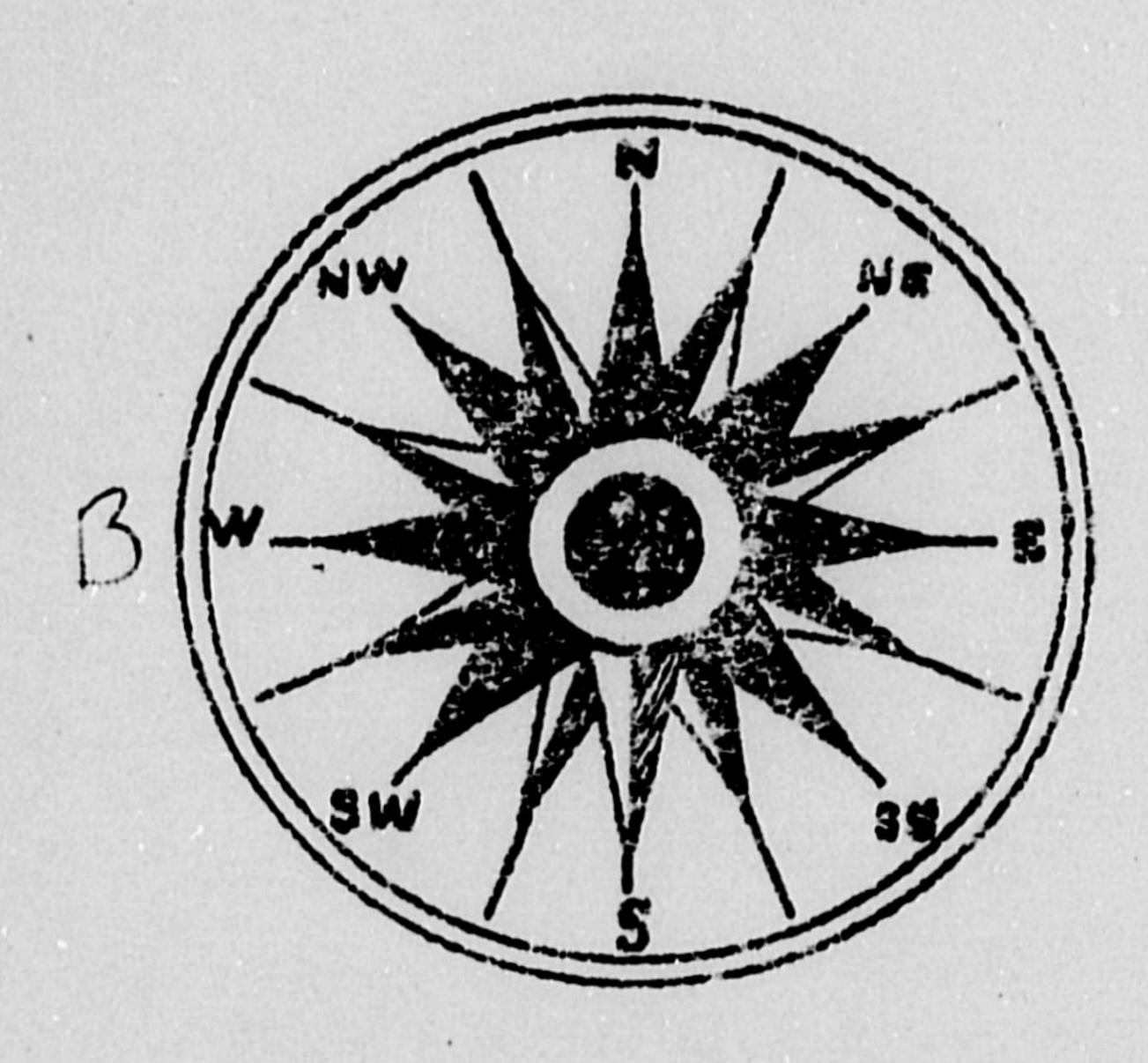
8.	IF you saw the object at NIGHT, what o	did you notice co	ncerning th	e STARS and	MOON?	
	8.1 STARS (Circle One):	8.2 MOC	ON (Circle (One):		
	a. None b. A few		Bright mod Dull moon			
	c. Many			ght - pitch d	ark	
	d. Don't remember	d.	Don't reme	mber		
9.	What were the weather conditions at the	time you saw the	• object?			
	CLOUDS (Circle One):	WEATHE	R (Circle ()ne):		
	a. Clear sky	a. Dry				
	b. Hazy	b. Fog,	mist, or lig	ht rain		
	c. Scattered clouds	(c. Mode	rate or heav	y rain		
1	d. Thick or heavy clouds	d. Snow				
		e. Don't	remember			
10.	The object appeared: (Circle One):					
	a. Solid d. As a	liabe				
		t remember				
	c. Vapor					
	If it appeared as a light, was it brighter a. Brighter b. Dimmer 11.1 Compare brightness to some comm	c. About the so				
12.	The edges of the object were:					
	(Circle One): a. Fuzzy or blurred b. Like a bright star c. Sharply outlined Don't remember		e. Othe			
13.	Did the object:		(Circ	le One for a	sch 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? h. Disappear and reappear?		Yes	No No	Don't know Don't know	
	ii. Disappear and reappear:			No		

14.	Did the object disappe	ar while you	were watch	ing it? if so, how?		
			1	1.1		
	1:5	1154	WENT			
1.						
15.	Did the object move be	hind someth	ning at any t	ime, particularly a c	: loud!	
	(Circle One):	Yes	(No	Don't Know.	IF you answered YES, then tell who	it
	it moved behind:					
16.	Did the object move in	front of sa	mething at a	ny time, particularly	a cloud?	
	(Circle One):			Don't Know.	IF you answered YES, then tell wha	
	in front of:		(No)	L'on I Know.	IL Aon guadeled I C2' mien iam wind	
17.	Tell in a few words the	following	things about	the object:		
	a. Sound	NI	in 3			
		111	N.E.			
	b. Color	17.				
18.					ngth in line with a known object and note is	
					d performed this experiment at the time of t	ine
	sighting, how much of	the object v	would have b	een covered by the	match head?	
19.	Draw a picture that wil	li show the	shape of the	object or objects.	Label and include in your sketch any detail	ils
	of the object that you	saw such as	wings, prof	rusions, etc., and es	specially exhaust trails or vapor trails.	
	Place an arrow beside	the drawing	to show the	direction the objec	t 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 est	imate?
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 s	av it was?
22. Where were you located when you saw the object?	23. Were you (Circle One)
(Circle One):	a. In the business section of a city?
a. Inside a building	In the residential section of a city?
b. In a car	(c./In open countryside?
c. Outdoors	d. Near an airfield?
d. In an airplane (type)	e. Flying over a city?
e. At sea	f. Flying over open country?
f. Other	g. Other
24. IF you were MOVING IN AN AUTOMOBILE or other volume 24.1 What direction were you moving? (Circle One)	whicle at the time, then complete the following questions:
a. North c. East	e. South · g. West
b. Northeast : d. Southeast	f. Southwest h. Northwest
24.2 How fast were you moving?	niles per hour.
24.3 Did you stop at any time while you were looking	
(Circle One) Yes No	
25. Did you observe the object through any of the followi	ng?
a. Eyeglasses Yes No	. Binoculars Yes No
	. Telescope Yes No
c. Windshield Yes No	. Theodolite Yes (No)
d. Window glass Yes No h	. Other
	ble of what you saw, describe in your own words a common would give the same appearance as the object which you saw.

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 on "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.

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30.	Have you ever seen this, or a similar object be	fore. If so give date or dat	es and location.	
		MoHIER SAW	Thurs ngt	
31.	Was anyone else with you at the time you saw 31.1 IF you answered YES, did they see the o 31.2 Please list their names and addresses;	bject too? (Circle One)	Yes No	s. Above
		Dad Mother; Si		
32.	Please give the following information about yo			
	NAME Last Name	First Name	Middle No	
	ADDRESS	City	7 7 6/10 Zone St	St &
	TELEPHONE NUMBER	AGE /6 SE	x 1/1/6	
	Indicate any additional information about yours		experience, which might	be pertinent.
33.	When and to whom did you report that you had	seen the object?	TDOD	
	Day Month	Yeor		

34.	Date you completed this questionnaire:		MARIE	1900	
		Day	Month	Year	
	Information which you feel pertinent and which is questionnaire or a narrative explanation of your		overed in the spec	ific points of the	

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