

PROJECT 10073 RECORD

1. DATE - TIME GROUP 22 Nov 67 23/0215Z	2. LOCATION Dayton, Ohio (1 witness)
3. SOURCE Civilian	10. CONCLUSION INSUFFICIENT DATA FOR EVALUATION
4. NUMBER OF OBJECTS One	Form 164 sent and returned "no such address."
LENGTH OF OBSERVATION Not Reported	11. BRIEF SUMMARY AND ANALYSIS
5. TYPE OF OBSERVATION Ground Visual	Observer stated she saw the object each night for several weeks. Real bright white, brighter than a star. Observer stated object drifted, but direction not given.
7. COURSE None Reported	
8. PHOTOS ☐ Yes ☒ No	
9. PHYSICAL EVIDENCE ☐ Yes ☒ No	

INSUFFICIENT DATA FOR EVALUATION

NO SUCH ADDRESSEE

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



REPLY TO
ATTN OF: TDET/UFO

26 April 1967

SUBJECT: UFO Observation, 22 Apr 67

22 Apr 67

Dayton, Ohio

TO: Mr. [REDACTED]
[REDACTED]
Dayton, Ohio 45406

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.

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

1 Atch
FTD Form 164 w/envelope

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?

Day 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?

Nearest Postal Address

City or Town

State or County

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

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

