PROJECT 10073 RECORD

1. DATE - TIME GROUP 20 April 68 21/00452	2. LOCATION Cincinnati, Ohio (Multiple)
3. SOURCE Civilian	10. CONCLUSION Probable Astro: (JUPITER) At 1945 JUPITER was due south of the observer at an angular elevation of approx 65 deg. At 2030 JUPITER was at approx azimuth of 215 deg and 65 deg elevation.
4. NUMBER OF OBJECTS One	
5. LENGTH OF OBSERVATION 45 Minutes	11. BRIEF SUMMARY AND ANALYSIS Observer sighted a bright star like object in the south at an elevation of 75 deg. 45 minutes later the object was still in view slightly south of SSW and at an elevation of about 80 deg. The observer stated that there were some clouds and that a few stars were visible. At the end of the sighting the object just faded out of view.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE See Summary	
8. PHOTOS ☐ Yes ☒ No	
9. PHYSICAL EVIDENCE ☐ Yes ☒ No	

FORM
FTD SEP 63 0-329 (TDE) Previous editions of this form may be used.

AFR 80-17(C1)

SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE

BUDGET BUREAU APPROVAL NUMBER 21-R359

THIS QUESTIONNAIRE HAS BEEN PREPARED SO THAT YOU CAN GIVE THE U.S. AIR FORCE AS MUCH INFORMATION AS POSSIBLE CONCERNING THE UNIDENTIFIED PHENOMENON THAT YOU HAVE OBSERVED. PLEASE TRY TO ANSWER ALL OF THE QUESTIONS. THE INFORMATION YOU GIVE WILL BE USED FOR RESEARCH PURPOSES. YOUR NAME WILL NOT BE USED IN CONNECTION WITH ANY OF YOUR STATEMENTS OR CONCLUSIONS WITHOUT YOUR PERMISSION. RETURN TO AIR FORCE BASE INVESTIGATOR FOR FORWARDING TO FTD (TDETR), WRIGHT-PATTERSON AFB, OHIO 45433, IAW AFR 80-17. *(IF ADDITIONAL SHEETS ARE NEEDED FOR NARRATIVE OR SKETCHES ATTACH SECURELY TO THIS FORM OR ANNOTATE WITH YOUR NAME FOR IDENTIFICATION.)*

1. WHEN DID YOU SEE THE PHENOMENON?

DAY 20 MONTH April YEAR 1968

2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON?

HOUR 8 7 MINUTES 45 ☐ A.M. ☒ P.M.

3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON?

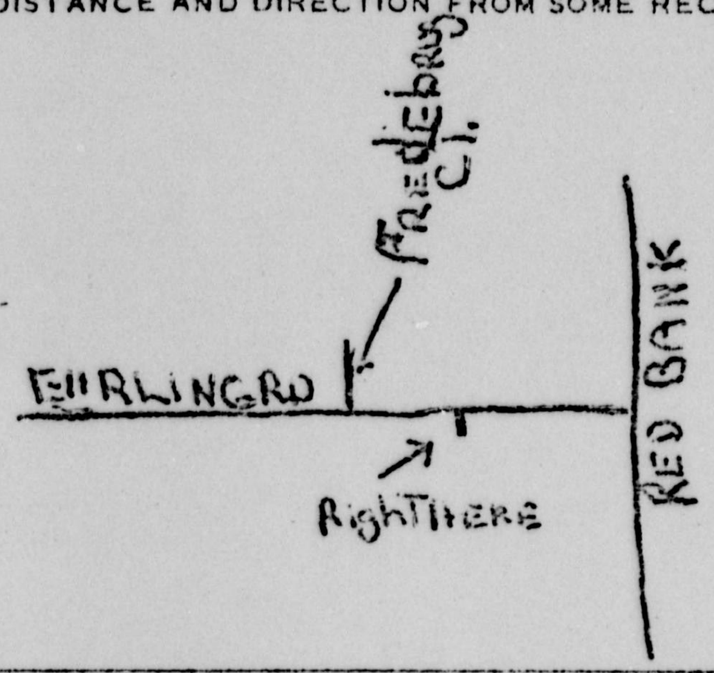
HOUR 8 MINUTES 30 ☐ A.M. ☒ P.M.

4. TIME ZONE ☐ DAYLIGHT SAVINGS ☐ STANDARD

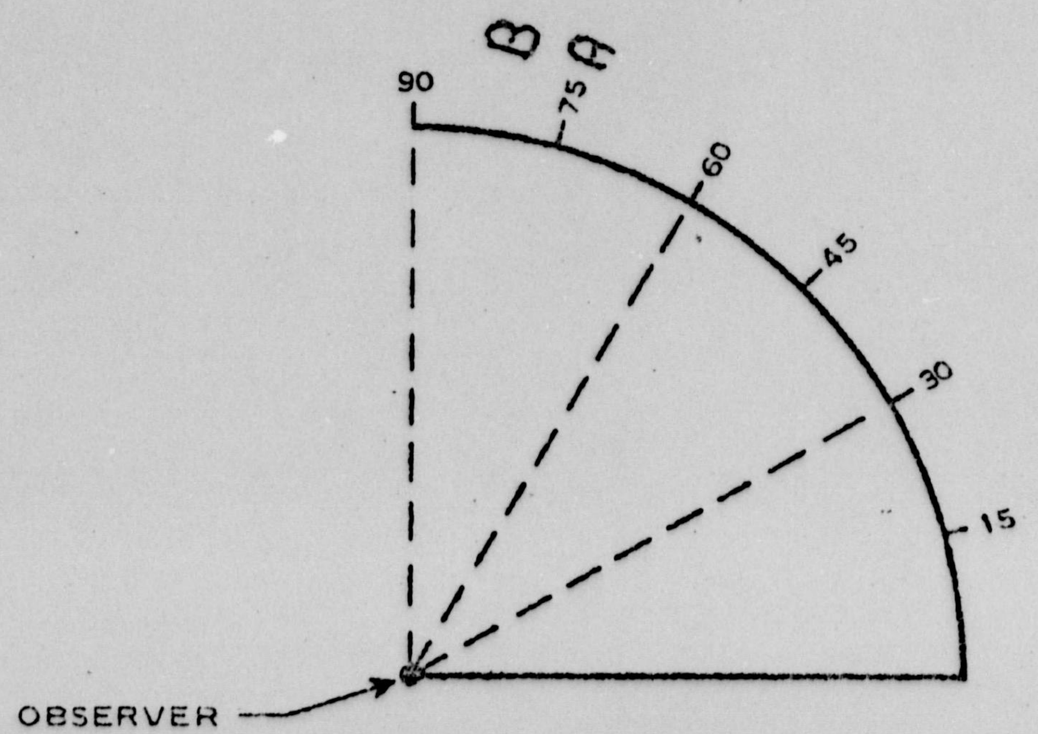
☒ EASTERN ☐ CENTRAL ☐ MOUNTAIN ☐ PACIFIC ☐ OTHER

5. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? IF IN CITY, GIVE THE NEAREST STREET ADDRESS AND INDICATE ON A HAND DRAWN MAP WHERE YOU WERE STANDING WITH REFERENCE TO THE ADDRESS. IF IN THE COUNTRY, IDENTIFY THE HIGHWAY YOU WERE ON OR NEAR AND TRY TO FIX A DISTANCE AND DIRECTION FROM SOME RECOGNIZABLE LANDMARK.

[redacted]

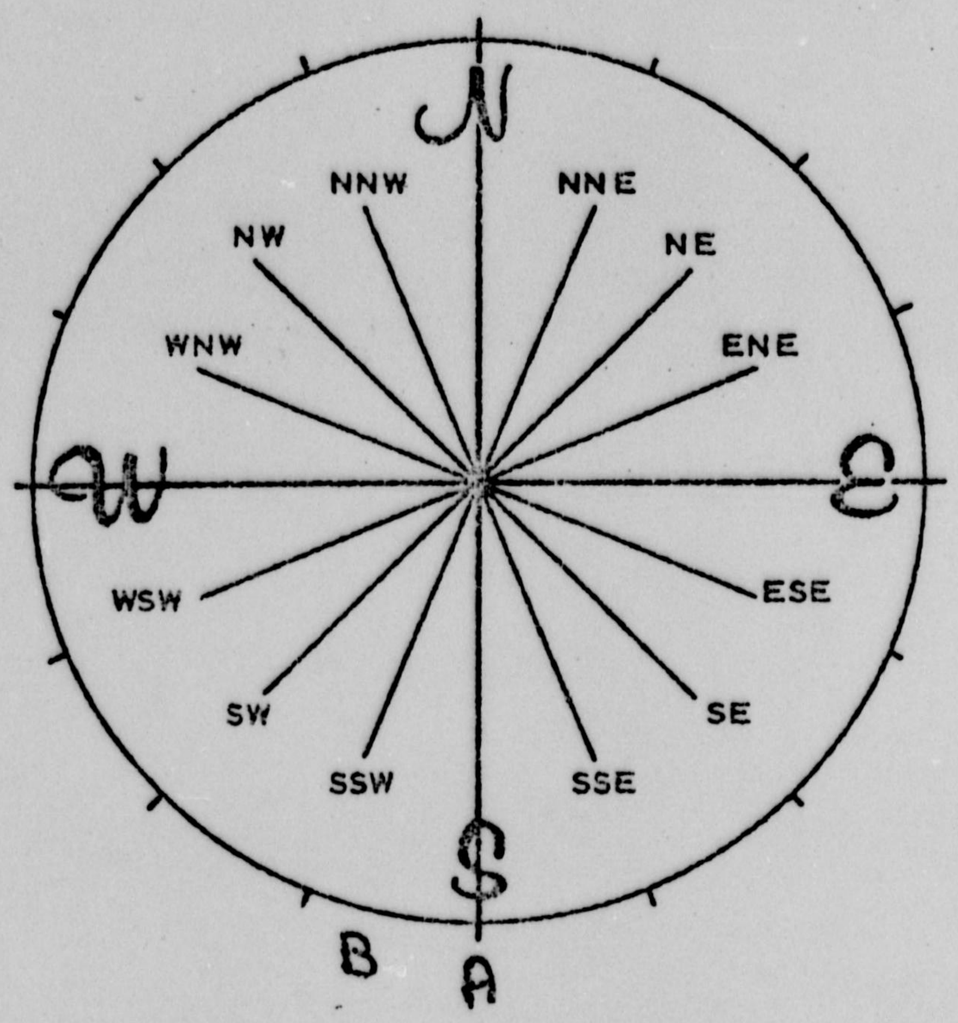


6. IMAGINE YOU ARE AT THE POINT SHOWN IN THE SKETCH, PLACE AN "A" ON THE CURVED LINE TO SHOW HOW HIGH THE PHENOMENON WAS ABOVE THE HORIZON, OR SKYLINE, WHEN FIRST SEEN. PLACE A "B" ON THE SAME CURVED LINE TO SHOW HOW HIGH ABOVE THE HORIZON THE PHENOMENON WAS WHEN LAST SEEN.

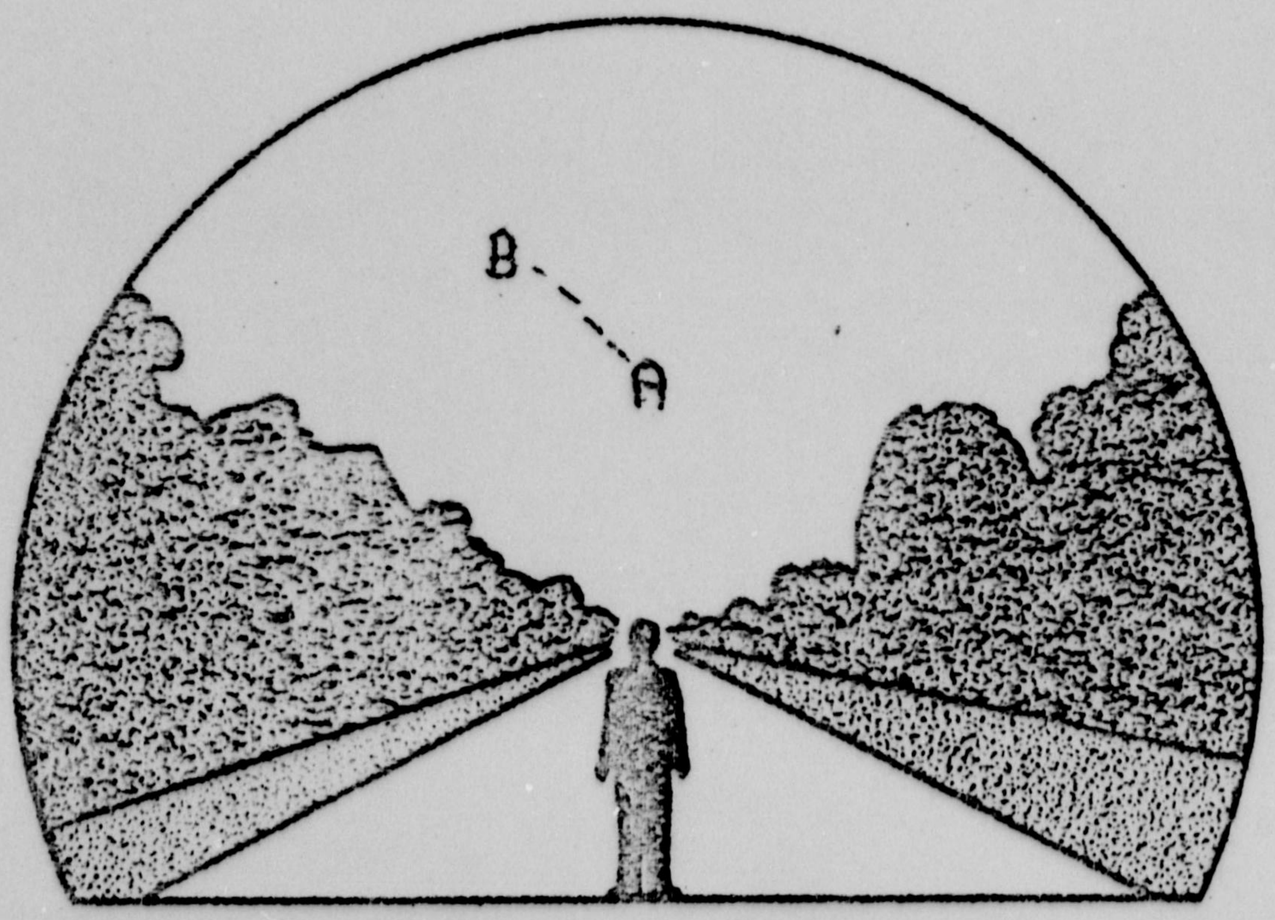


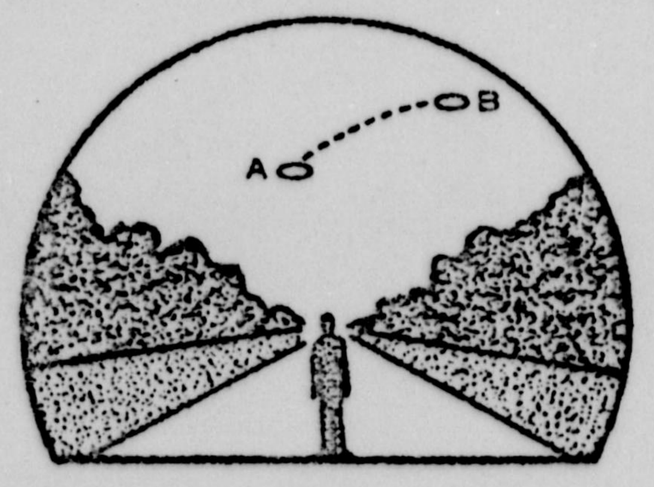
AF FORM AUG 67 117

6A. NOW IMAGINE YOU ARE AT THE CENTER OF THE COMPASS ROSE. PLACE AN "A" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN FIRST SEEN. PLACE A "B" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN LAST SEEN.



7. IN THE SKETCH BELOW, PLACE AN "A" AT THE POSITION OF THE PHENOMENON WHEN FIRST SEEN, AND A "B" AT THE POSITION OF THE PHENOMENON WHEN LAST SEEN. CONNECT THE "A" AND "B" WITH A LINE TO APPROXIMATE THE MOVEMENT OF THE PHENOMENON BETWEEN "A" AND "B". THAT IS, SCHEMATICALLY SHOW WHETHER THE MOVEMENT APPEARED TO BE STRAIGHT, CURVED OR ZIG-ZAG. REFER TO SMALLER SKETCH AS AN EXAMPLE OF HOW TO COMPLETE THE LARGER SKETCH.





8. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? *(Check appropriate blocks.)*

X	OUTDOORS		IN BUSINESS SECTION OF CITY
	IN BUILDING	X	IN RESIDENTIAL SECTION OF CITY
	IN CAR ☐ AS DRIVER ☐ AS PASSENGER		IN OPEN COUNTRYSIDE
	IN BOAT		NEAR AIRFIELD
	IN AIRPLANE ☐ AS PILOT ☐ AS PASSENGER		FLYING OVER CITY
	OTHER		FLYING OVER OPEN COUNTRY
			OTHER

A. IF YOU WERE IN A VEHICLE, COMPLETE THE FOLLOWING:

WHAT DIRECTION WERE YOU MOVING?				HOW FAST WERE YOU MOVING?
	NORTH		EAST	
	SOUTH		WEST	DID YOU STOP ANYTIME WHILE OBSERVING THE PHENOMENON? ☐ YES ☐ NO
	NORTHEAST		SOUTHEAST	
	NORTHWEST		SOUTHWEST	

EXPLAIN WHETHER SUCH MOVEMENT AFFECTS YOUR SKETCHES IN ITEMS 5 AND 6.

DESCRIBE TYPE OF VEHICLE YOU WERE IN AND TYPE OF ROAD, TERRAIN OR BODY OF WATER YOU TRAVERSED DURING THE SIGHTING. STATE WHETHER WINDOWS OR CONVERTIBLE TOP WERE UP OR DOWN.

HOW MUCH OTHER TRAFFIC WAS THERE?

DID YOU NOTICE ANY AIRPLANES? ☒ YES ☐ NO. IF "YES," DESCRIBE WHEN THEY WERE IN SIGHT RELATIVE TO THE TIME OF SIGHTING THE PHENOMENON AND WHERE THEY WERE IN THE SKY RELATIVE TO THE POSITION OF THE PHENOMENON.

9. HOW LONG WAS THE PHENOMENON IN SIGHT?

LENGTH OF TIME					
45 min's onward		CERTAIN OF TIME		NOT VERY SURE
	X	FAIRLY CERTAIN		JUST A GUESS

HOW WAS TIME DETERMINED?

WAS THE PHENOMENON IN SIGHT CONTINUOUSLY? ☒ YES ☐ NO. IF "NO," INDICATE WHETHER THIS IS DUE TO YOUR MOVEMENT OR THE BEHAVIOR OF THE PHENOMENON, AND DESCRIBE SUCH MOVEMENT OR BEHAVIOR. INDICATE DISAPPEARANCES ON PREVIOUS SKETCHES.

10. IF THERE WERE MORE THAN ONE PHENOMENON, HOW MANY WERE THERE? DRAW A PICTURE TO SHOW HOW THEY WERE ARRANGED. DID THIS ARRANGEMENT CHANGE DURING THE SIGHTING?

I

11. CONDITIONS *(Check appropriate blocks.)*

A. SKY		B. WEATHER			
	DAY	X	CUMULUS CLOUDS *(Low fluffy)*		FOG OR MIST
	TWILIGHT		CIRRUS CLOUDS *(High fleecy or Herring-bone)*		HEAVY RAIN
X	NIGHT				LIGHT RAIN OR DRIZZLE
	CLEAR		NIMBUS CLOUDS *(Rain)*		HAIL
	PARTLY CLOUDY		CUMULONIMBUS CLOUDS *(Thunderstorms)*		SNOW OR SLEET
	COMPLETELY OVERCAST				UNKNOWN
			HAZE OR SMOG	X	NONE OF THE ABOVE

C. IF THE SIGHTING WAS AT TWILIGHT OR NIGHT, WHAT DID YOU NOTICE ABOUT THE STARS AND MOON?

(1) STARS		(2) MOON			
	NONE		BRIGHT MOONLIGHT	X	NO MOONLIGHT
X	A FEW		MOON WITH HALO		UNKNOWN
	MANY		MOON HIDDEN BY CLOUDS		
	UNKNOWN		PARTIAL *(New or quarter)*		

D. IF SIGHTING WAS IN DAYLIGHT, WAS THE SUN VISIBLE? ☐ YES ☐ NO. IF "YES," WHERE WAS THE SUN AS YOU FACED THE PHENOMENON?

	IN FRONT OF YOU		TO YOUR RIGHT		OVERHEAD *(Near noon)*
	IN BACK OF YOU		TO YOUR LEFT		UNKNOWN

E. SPECIFY THE MAJOR SOURCE OF ILLUMINATION PRESENT DURING THE SIGHTING, SUCH AS THE SUN, HEADLIGHTS OR STREET LAMP, ETC. FOR TERRESTRIAL ILLUMINATION, SPECIFY DISTANCE TO LIGHT SOURCE.

NONE

12. GIVE A BRIEF DESCRIPTION OF THE PHENOMENON, INDICATING WHETHER IT APPEARED DARK OR LIGHT, WHETHER IT REFLECTED LIGHT OR WAS SELF-LUMINOUS AND WHAT COLORS YOU NOTICED. DESCRIBE YOUR IMPRESSION OF WHETHER IT WAS SOLID OR TRANSPARENT, WHETHER EDGES WERE SHARP OR FUZZY. DESCRIBE THE SHAPE OR INDICATE IF IT APPEARED AS A POINT OF LIGHT. INDICATE COMPARISONS WITH OTHER OBSERVED OBJECTS, LIKE STARS, A LIGHT OR OTHER OBJECT IN YOUR FIELD OF VIEW.

BRIGHT SELF-LUMINOUS SOLID SHARP
UNKNOW a 60 WATT LIGHT 30 ft away

13. DID THE PHENOMENON	YES	NO	UNKNOWN
MOVE IN A STRAIGHT LINE?			
STAND STILL AT ANYTIME?	X		
SUDDENLY SPEED UP AND RUN AWAY?		X	
BREAK UP IN PARTS AND EXPLODE?		X	
CHANGE COLOR?		X	
GIVE OFF SMOKE?		X	
CHANGE BRIGHTNESS?	X		
CHANGE SHAPE?		X	
FLASH OR FLICKER?		X	
DISAPPEAR AND REAPPEAR?		X	
SPIN LIKE A TOP?			X
MAKE A NOISE?		X	
FLUTTER OR WOBBLE?		X	

14. WHAT DREW YOUR ATTENTION TO THE PHENOMENON?

UNALLy Brightness in sky

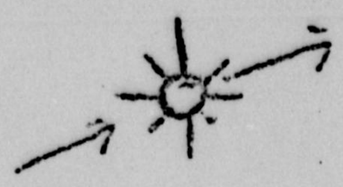
A. HOW DID IT FINALLY DISAPPEAR?

Just faded out

B. DID THE PHENOMENON MOVE BEHIND OR IN FRONT OF SOMETHING, LIKE A CLOUD, TREE, OR BUILDING AT ANY TIME?
☒ YES ☐ NO. IF "YES," DESCRIBE.

Cloud

13. DRAW A PICTURE THAT WILL SHOW THE SHAPE OF THE PHENOMENON. INCLUDE AND LABEL ANY DETAILS THAT MIGHT HAVE APPEARED AS WINGS OR PROTRUSIONS, AND INDICATE EXHAUST OR VAPOR TRAILS. INDICATE BY AN ARROW THE DIRECTION THE PHENOMENON WAS MOVING.



16. WHAT WAS THE ANGULAR SIZE? HOLD A MATCH AT ARM'S LENGTH IN FRONT OF A KNOWN OBJECT, SUCH AS A STREET LAMP OR THE MOON. NOTE HOW MUCH OF THE OBJECT IS COVERED BY THE HEAD OF THE MATCH. NOW IF YOU HAD BEEN ABLE TO PERFORM THIS EXPERIMENT AT THE TIME OF THE SIGHTING, ESTIMATE WHAT FRACTION OF THE PHENOMENON WOULD HAVE BEEN COVERED BY THE MATCH HEAD.

MUST BE COVERED

17. DID YOU OBSERVE THE PHENOMENON THROUGH ANY OF THE FOLLOWING? INCLUDE INFORMATION ON MODEL, TYPE, FILTER, LENS PRESCRIPTION OR OTHER APPLICABLE DATA.

X	EYEGLASSES		CAMERA VIEWER
	SUNGLASSES	X	BINOCULARS
	WINDSHIELD		TELESCOPE
	SIDE WINDOW OF VEHICLE		THEODOLITE
	WINDOWPANE		OTHER

A. DO YOU ORDINARILY WEAR GLASSES? [X] YES [ ] NO

B. DO YOU USE READING GLASSES? [X] YES [ ] NO

18. WHAT WAS YOUR IMPRESSION OF THE SPEED OF THE PHENOMENON? GIVE ESTIMATE OF SPEED Steady Speed of 1 Star

19. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE PHENOMENON? GIVE ESTIMATE OF DISTANCE 150 mi.

20. IN ORDER THAT WE MAY OBTAIN AS CLEAR A PICTURE AS POSSIBLE OF WHAT YOU SAW, DESCRIBE IN YOUR OWN WORDS A COMMON OBJECT OR OBJECTS WHICH, WHEN PLACED IN THE SKY, SIMILAR TO WHERE YOU NOTED THE PHENOMENON, WOULD BEAR SOME RESEMBLANCE TO WHAT YOU SAW. DESCRIBE SIMILARITIES AND DIFFERENCES BETWEEN THE COMMON OBJECT AND WHAT YOU SAW.

Star change brightness

21. DID YOU NOTICE ANY ODOR, NOISE, OR HEAT EMANATING FROM THE PHENOMENON OR ANY EFFECT ON YOURSELF, ANIMALS OR MACHINERY IN THE VICINITY? [ ] YES [X] NO. IF "YES," DESCRIBE.

A. DID THE PHENOMENON DISTURB THE GROUND OR LEAVE ANY PHYSICAL EVIDENCE. [ ] YES [X] NO. IF "YES," DESCRIBE.

22. HAVE YOU EVER SEEN THIS OR A SIMILAR PHENOMENON BEFORE? ☒ YES ☐ NO. IF "YES," GIVE DATE AND LOCATION.

JAN 23, 1967 [redacted]

23. WAS ANYONE WITH YOU AT THE TIME YOU SAW THE PHENOMENON? ☒ YES ☐ NO. IF "YES," DID THEY SEE IT TOO? ☒ YES ☐ NO.

A. LIST THEIR NAMES AND ADDRESSES

[redacted] RD [redacted] RD [redacted]

24. GIVE THE FOLLOWING INFORMATION ABOUT YOURSELF

LAST NAME, FIRST NAME, MIDDLE NAME [redacted]

ADDRESS (Street, City, State, Zip Code) [redacted] Cincinnati OHIO 45227

TELEPHONE (Area Code) [redacted]

AGE		MALE		FEMALE
13	X			

INDICATE ADDITIONAL INFORMATION INCLUDING OCCUPATION AND ANY EXPERIENCE WHICH MAY BE PERTINENT.

STUDENT NEWSPAPER BOY

25. WHEN AND TO WHOM DID YOU REPORT THAT YOU HAD SIGHTED THIS PHENOMENON?

NAME CORRAL DAY 30 MONTH APRIL YEAR 68

26. DATE YOU COMPLETED THIS QUESTIONNAIRE.

DAY _____ MONTH APRIL YEAR 68

27. INFORMATION WHICH YOU FEEL IS PERTINENT BUT WHICH IS NOT ADEQUATELY COVERED IN THIS QUESTIONNAIRE, ALTERNATIVELY PROVIDE A NARRATIVE EXPLANATION OF THE SIGHTING.

NONE

AFR 80-17(C1)

SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE

BUDGET BUREAU APPROVAL NUMBER 21-R359

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1. WHEN DID YOU SEE THE PHENOMENON?
DAY 20 MONTH April YEAR 1968

2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON?
HOUR 7: MINUTES 45 ☐ A.M. ☒ P.M.

3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON?
HOUR 8: MINUTES 30 ☐ A.M. ☒ P.M.

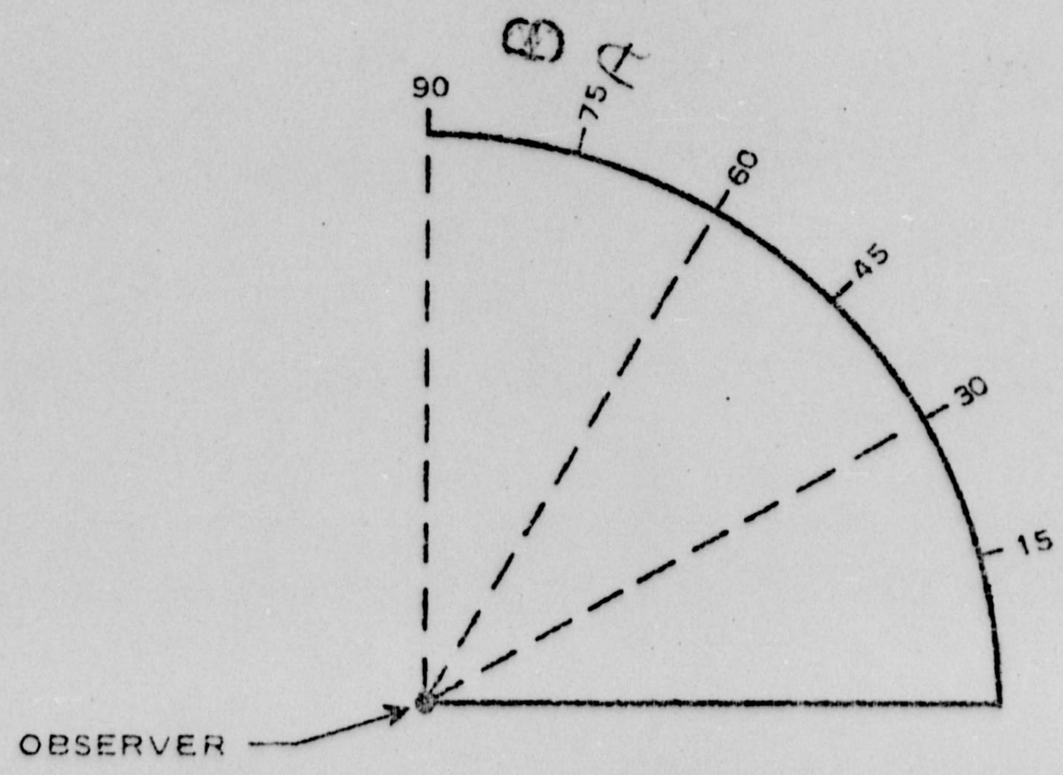
4. TIME/ZONE ☐ DAYLIGHT SAVINGS ☐ STANDARD
☒ EASTERN ☐ CENTRAL ☐ MOUNTAIN ☐ PACIFIC ☐ OTHER

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[redacted] TH HOUSE UP LEFT SIDE

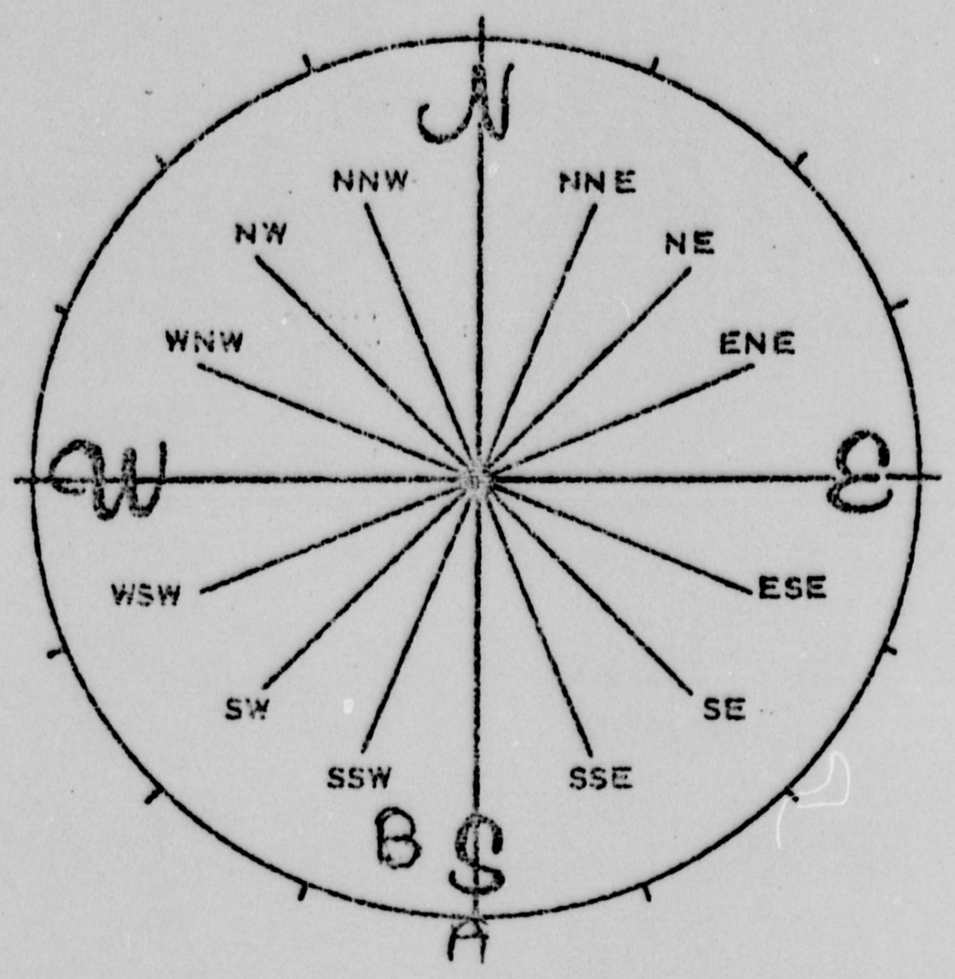


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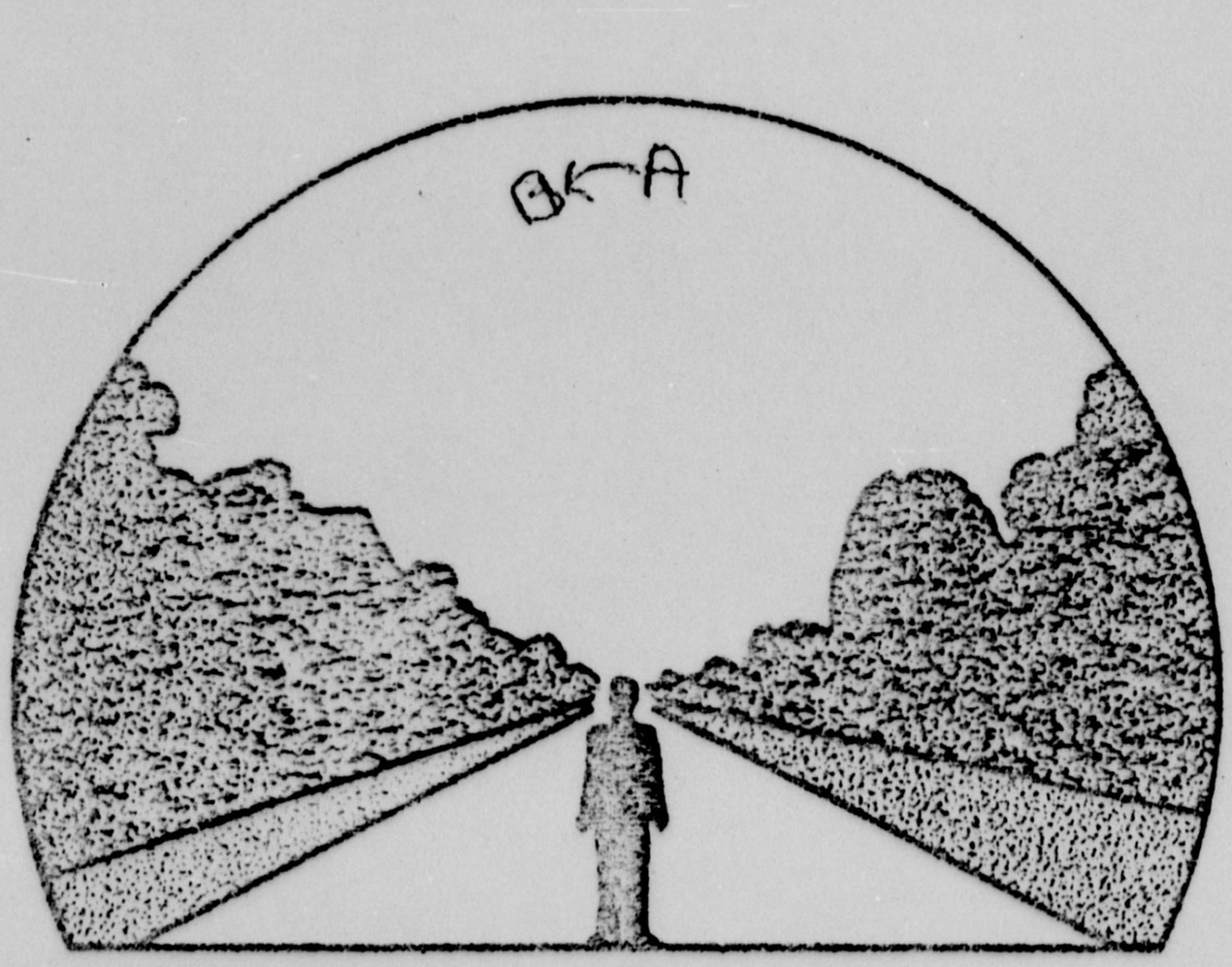


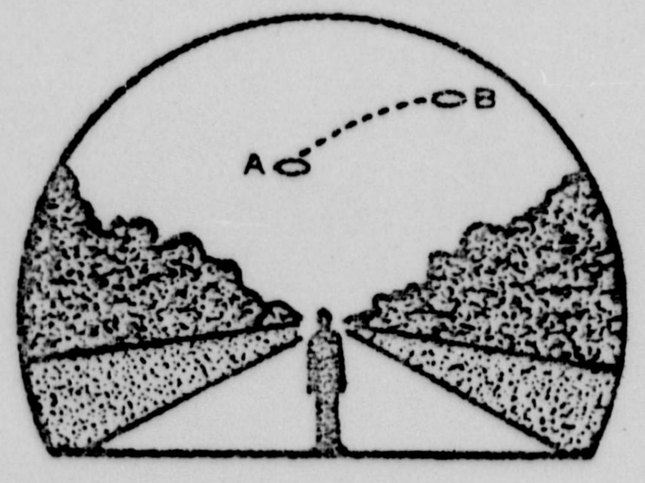
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8. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? *(Check appropriate blocks.)*

X	OUTDOORS		IN BUSINESS SECTION OF CITY
	IN BUILDING		IN RESIDENTIAL SECTION OF CITY X
	IN CAR ☐ AS DRIVER ☐ AS PASSENGER		IN OPEN COUNTRYSIDE
	IN BOAT		NEAR AIRFIELD
	IN AIRPLANE ☐ AS PILOT ☐ AS PASSENGER		FLYING OVER CITY
	OTHER		FLYING OVER OPEN COUNTRY
			OTHER

A. IF YOU WERE IN A VEHICLE, COMPLETE THE FOLLOWING:

WHAT DIRECTION WERE YOU MOVING?				HOW FAST WERE YOU MOVING?
	NORTH		EAST	
	SOUTH		WEST	DID YOU STOP ANYTIME WHILE OBSERVING THE PHENOMENON?
	NORTHEAST		SOUTHEAST	
	NORTHWEST		SOUTHWEST	☐ YES ☐ NO

EXPLAIN WHETHER SUCH MOVEMENT AFFECTS YOUR SKETCHES IN ITEMS 5 AND 6.

DESCRIBE TYPE OF VEHICLE YOU WERE IN AND TYPE OF ROAD, TERRAIN OR BODY OF WATER YOU TRAVERSED DURING THE SIGHTING. STATE WHETHER WINDOWS OR CONVERTIBLE TOP WERE UP OR DOWN.

HOW MUCH OTHER TRAFFIC WAS THERE?

DID YOU NOTICE ANY AIRPLANES? ☒ YES ☐ NO. IF "YES," DESCRIBE WHEN THEY WERE IN SIGHT RELATIVE TO THE TIME OF SIGHTING THE PHENOMENON AND WHERE THEY WERE IN THE SKY RELATIVE TO THE POSITION OF THE PHENOMENON.

9. HOW LONG WAS THE PHENOMENON IN SIGHT?

LENGTH OF TIME 45 min. approximately		CERTAIN OF TIME		NOT VERY SURE
	✓	FAIRLY CERTAIN		JUST A GUESS

HOW WAS TIME DETERMINED?

WAS THE PHENOMENON IN SIGHT CONTINUOUSLY? ☒ YES ☐ NO. IF "NO," INDICATE WHETHER THIS IS DUE TO YOUR MOVEMENT OR THE BEHAVIOR OF THE PHENOMENON, AND DESCRIBE SUCH MOVEMENT OR BEHAVIOR. INDICATE DISAPPEARANCES ON PREVIOUS SKETCHES.

10. IF THERE WERE MORE THAN ONE PHENOMENON, HOW MANY WERE THERE? DRAW A PICTURE TO SHOW HOW THEY WERE ARRANGED. DID THIS ARRANGEMENT CHANGE DURING THE SIGHTING?

JUST ONE

11. CONDITIONS *(Check appropriate blocks.)*

A. SKY		B. WEATHER			
	DAY	X	CUMULUS CLOUDS *(Low fluffy)*		FOG OR MIST
	TWILIGHT		CIRRUS CLOUDS *(High fleecy or Herring-bone)*		HEAVY RAIN
V	NIGHT				LIGHT RAIN OR DRIZZLE
	CLEAR		NIMBUS CLOUDS *(Rain)*		HAIL
	PARTLY CLOUDY		CUMULONIMBUS CLOUDS *(Thunderstorms)*		SNOW OR SLEET
	COMPLETELY OVERCAST				UNKNOWN
			HAZE OR SMOG	X	NONE OF THE ABOVE

C. IF THE SIGHTING WAS AT TWILIGHT OR NIGHT, WHAT DID YOU NOTICE ABOUT THE STARS AND MOON?

(1) STARS		(2) MOON		
	NONE		BRIGHT MOONLIGHT	X	NO MOONLIGHT
X	A FEW		MOON WITH HALO		UNKNOWN
	MANY		MOON HIDDEN BY CLOUDS		
	UNKNOWN		PARTIAL *(New or quarter)*		

D. IF SIGHTING WAS IN DAYLIGHT, WAS THE SUN VISIBLE? ☐ YES ☐ NO. IF "YES," WHERE WAS THE SUN AS YOU FACED THE PHENOMENON?

	IN FRONT OF YOU		TO YOUR RIGHT		OVERHEAD *(Near noon)*
	IN BACK OF YOU		TO YOUR LEFT		UNKNOWN

E. SPECIFY THE MAJOR SOURCE OF ILLUMINATION PRESENT DURING THE SIGHTING, SUCH AS THE SUN, HEADLIGHTS OR STREET LAMP, ETC. FOR TERRESTRIAL ILLUMINATION, SPECIFY DISTANCE TO LIGHT SOURCE.

NONE

12. GIVE A BRIEF DESCRIPTION OF THE PHENOMENON, INDICATING WHETHER IT APPEARED DARK OR LIGHT, WHETHER IT REFLECTED LIGHT OR WAS SELF-LUMINOUS AND WHAT COLORS YOU NOTICED. DESCRIBE YOUR IMPRESSION OF WHETHER IT WAS SOLID OR TRANSPARENT, WHETHER EDGES WERE SHARP OR FUZZY. DESCRIBE THE SHAPE OR INDICATE IF IT APPEARED AS A POINT OF LIGHT. INDICATE COMPARISONS WITH OTHER OBSERVED OBJECTS, LIKE STARS, A LIGHT OR OTHER OBJECT IN YOUR FIELD OF VIEW.

IT WAS ~~BRT~~ LIGHT
" " SELF-LUMINOUS
" " WHITE
" " SOLID
THE EDGES WERE SHARP
COULDN'T TELL
A 60 WATT LIGHT ~~AT~~ THIRTY FT AWAY

13. DID THE PHENOMENON	YES	NO	UNKNOWN
MOVE IN A STRAIGHT LINE?			
STAND STILL AT ANYTIME?	X		
SUDDENLY SPEED UP AND RUN AWAY?		X	
BREAK UP IN PARTS AND EXPLODE?		X	
CHANGE COLOR?		X	
GIVE OFF SMOKE?		X	
CHANGE BRIGHTNESS?	X		
CHANGE SHAPE?		X	
FLASH OR FLICKER?		X	
DISAPPEAR AND REAPPEAR?		X	
SPIN LIKE A TOP?		X	
MAKE A NOISE?		X	X
FLUTTER OR WOBBLE?		X	

14. WHAT DREW YOUR ATTENTION TO THE PHENOMENON?

Usually brightness in sky

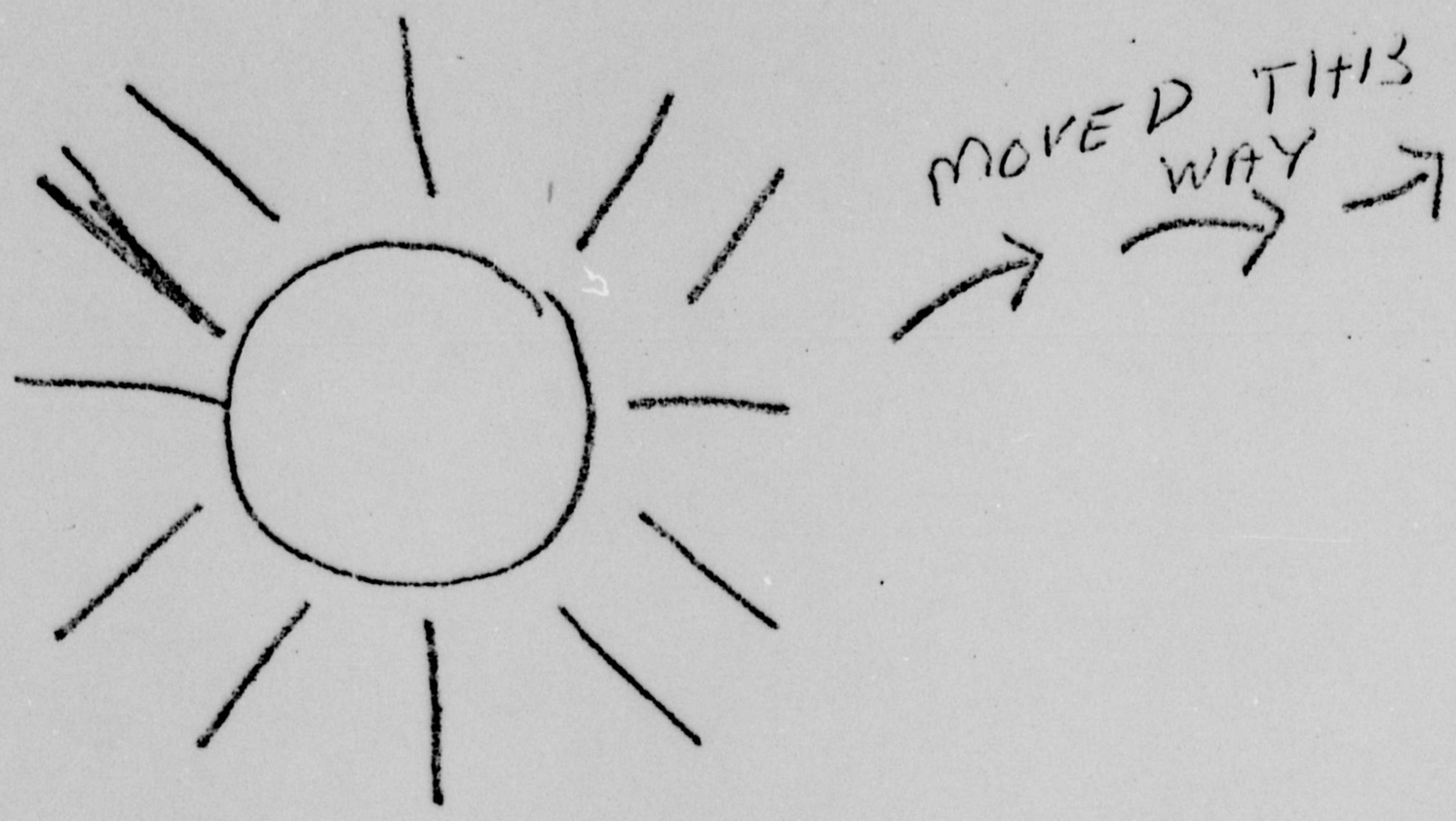
A. HOW DID IT FINALLY DISAPPEAR?

just faded out

B. DID THE PHENOMENON MOVE BEHIND OR IN FRONT OF SOMETHING, LIKE A CLOUD, TREE, OR BUILDING AT ANY TIME?
☒ YES ☐ NO. IF "YES," DESCRIBE.

Behind cloud

15. DRAW A PICTURE THAT WILL SHOW THE SHAPE OF THE PHENOMENON. INCLUDE AND LABEL ANY DETAILS THAT MIGHT HAVE APPEARED AS WINGS OR PROTRUSIONS, AND INDICATE EXHAUST OR VAPOR TRAILS. INDICATE BY AN ARROW THE DIRECTION THE PHENOMENON WAS MOVING.



over enlarged

6

16. WHAT WAS THE ANGULAR SIZE? HOLD A MATCH AT ARM'S LENGTH IN FRONT OF A KNOWN OBJECT, SUCH AS A STREET LAMP OR THE MOON. NOTE HOW MUCH OF THE OBJECT IS COVERED BY THE HEAD OF THE MATCH. NOW IF YOU HAD BEEN ABLE TO PERFORM THIS EXPERIMENT AT THE TIME OF THE SIGHTING, ESTIMATE WHAT FRACTION OF THE PHENOMENON WOULD HAVE BEEN COVERED BY THE MATCH HEAD.

most of it would be covered

17. DID YOU OBSERVE THE PHENOMENON THROUGH ANY OF THE FOLLOWING? INCLUDE INFORMATION ON MODEL, TYPE, FILTER, LENS PRESCRIPTION OR OTHER APPLICABLE DATA.

	EYEGLASSES		CAMERA VIEWER
	SUNGLASSES	X	BINOCULARS TASCO 7x35
	WINDSHIELD		TELESCOPE
	SIDE WINDOW OF VEHICLE		THEODOLITE
	WINDOWPANE		OTHER

A. DO YOU ORDINARILY WEAR GLASSES? ☐ YES ☒ NO

B. DO YOU USE READING GLASSES? ☐ YES ☒ NO

18. WHAT WAS YOUR IMPRESSION OF THE SPEED OF THE PHENOMENON? GIVE ESTIMATE OF SPEED STOOD STILL MOST OF TIME

19. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE PHENOMENON? GIVE ESTIMATE OF DISTANCE 100 MI.

20. IN ORDER THAT WE MAY OBTAIN AS CLEAR A PICTURE AS POSSIBLE OF WHAT YOU SAW, DESCRIBE IN YOUR OWN WORDS A COMMON OBJECT OR OBJECTS WHICH, WHEN PLACED IN THE SKY, SIMILAR TO WHERE YOU NOTED THE PHENOMENON, WOULD BEAR SOME RESEMBLANCE TO WHAT YOU SAW. DESCRIBE SIMILARITIES AND DIFFERENCES BETWEEN THE COMMON OBJECT AND WHAT YOU SAW.

Looked like star changed brightness had points ~~[illegible]~~.

21. DID YOU NOTICE ANY ODOR, NOISE, OR HEAT EMANATING FROM THE PHENOMENON OR ANY EFFECT ON YOURSELF, ANIMALS OR MACHINERY IN THE VICINITY? ☐ YES ☒ NO. IF "YES," DESCRIBE.

A. DID THE PHENOMENON DISTURB THE GROUND OR LEAVE ANY PHYSICAL EVIDENCE. ☐ YES ☒ NO. IF "YES," DESCRIBE.

22. HAVE YOU EVER SEEN THIS OR A SIMILAR PHENOMENON BEFORE? ☐ YES ☒ NO. IF "YES," GIVE DATE AND LOCATION.

23. WAS ANYONE WITH YOU AT THE TIME YOU SAW THE PHENOMENON? ☒ YES ☐ NO. IF "YES," DID THEY SEE IT TOO? ☒ YES ☐ NO.

A. LIST THEIR NAMES AND ADDRESSES

[redacted]

24. GIVE THE FOLLOWING INFORMATION ABOUT YOURSELF

LAST NAME, FIRST NAME, MIDDLE NAME

[redacted]

ADDRESS [redacted] (Zip Code) [redacted] ati Ohio 2

TEL [redacted]

AGE		MALE		FEMALE
12	X			

INDICATE ADDITIONAL INFORMATION INCLUDING OCCUPATION AND ANY EXPERIENCE WHICH MAY BE PERTINENT.

STUDENT

25. WHEN AND TO WHOM DID YOU REPORT THAT YOU HAD SIGHTED THIS PHENOMENON?

NAME [redacted] DAY 20 MONTH April YEAR 1965

26. DATE YOU COMPLETED THIS QUESTIONNAIRE.

DAY _____ MONTH April YEAR 1965

27. INFORMATION WHICH YOU FEEL IS PERTINENT BUT WHICH IS NOT ADEQUATELY COVERED IN THIS QUESTIONNAIRE, ALTERNATIVELY PROVIDE A NARRATIVE EXPLANATION OF THE SIGHTING.

NONE OTHER IMFORMATION

TDPT (UFO) Lt Col Quintanilla, Jr/70916/mhs/29 May 68

UFO Observation, 20 April 1968

31 MAY 1968

[redacted]
Cincinnati, Ohio 45227

1. Reference your unidentified observation of 20 April 1968, which you reported to the Air Force at Wright-Patterson AFB, Ohio.

2. Analysis indicates that you were probably observing the planet Jupiter. At 7:45 pm on the 20th of April, Jupiter was due south at an angular elevation of approximately 65 degrees. At 8:30 pm it was in the southwest at approximately 65 degrees elevation. On 20 April, Jupiter had a stellar magnitude of -1.8 and was the brightest star-like object in the sky at the time of your observation.

3. Once again, thank you for reporting your observation to the Air Force.

HECTOR QUINTANILLA, Jr, Lt Colonel, USAF
Chief, Aerial Phenomena Office
Aerospace Technologies Division
Production Directorate

TDPT (UFO) OFFICIAL FILE COPY

TDPT (UFO) Lt Col Quintanilla/70916/mhs/29 May 68

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Aerospace Technologies Division
Production Directorate

TDPT (UFO) OFFICIAL FILE CY

20 APRIL 68

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

24 APR 1968

REPLY TO ATTN OF: TDPT (UFO)

SUBJECT: UFO Observation , 20 April 1968

TO: [redacted]
Cincinnati, Ohio 45227

Your name has been given to the Aerial Phenomena Office (Project Blue Book) as being a witness to an unidentified flying object. If you were a witness to an UFO sighting on 20 April 1968 would you please complete the attached AF Form 117 and return it in the envelope provided. If you were not a witness to this sighting, would you please make a statement to this effect on the attached form. The information which you provide will be used in evaluating this observation. Thank you for your assistance in this matter.

HECTOR QUINTANILLA, Jr, Major, USAF
Chief, Aerial Phenomena Office
Aerospace Technologies Division
Production Directorate

1 Atch
AF Form 117 w/envelope

20 April 68

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

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TO: [redacted]
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HECTOR QUINTANILLA, Jr, Major, USAF
Chief, Aerial Phenomena Office
Aerospace Technologies Division
Production Directorate

1 Atch
AF Form 117 w/envelope

Duty Off Late

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?

20	APRIL	65
Day	Month	Year

2. Time of day: 2020 _____
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] CINCINNATI OHIO

Nearest Postal Address | City or Town | State or County

5. How long was object in sight? (Total Duration) _____ 20.25 _____
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 X

6. What was the condition of the sky?

DAY	NIGHT
a. Bright	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
b. In back of you
c. To your right
d. To your left
e. Overhead
f. Don't remember

FORM
FTD OCT 62 164 This form supersedes FTD 164, Jul 61, which is obsolete.

8. IF you saw the object at NIGHT, 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. What were the weather conditions at the time you saw the object?

CLOUDS *(Circle One)*:

a. Clear sky
b. Hazy
c. Scattered clouds
d. Thick or heavy clouds

WEATHER *(Circle One)*:

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

10. The object appeared: *(Circle One)*:

a. Solid
b. Transparent
c. Vapor
d. As a light
e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? *(Circle One)*:

a. Brighter
b. Dimmer
c. About the same
d. Don't know

11.1 Compare brightness to some common object:

GOWN LIGHT 30 ft Away

12. 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 _____

13. 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

14. Did the object disappear while you were watching it? If so, how?

into the clouds

15. Did the object move behind something at any time, particularly a cloud?

(Circle One): Yes No Don't Know. IF you answered YES, then tell what it moved behind: *Parent behind clouds*

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One): Yes (No) Don't Know. IF you answered YES, then tell what in front of: _____

17. Tell in a few words the following things about the object:

a. Sound *NO*

b. Color *WHITE*

18. 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?

about all

19. 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.

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 estimate? _____

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 say it was? as high as a jet airplane

22. 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 _____

23. 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. Near an airfield?
e. Flying over a city?
f. Flying over open country?
g. Other _____

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

a. North
b. Northeast
c. East
d. Southeast
e. South
f. Southwest
g. West
h. Northwest

24.2 How fast were you moving? _____ miles per hour.

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

(Circle One) Yes No

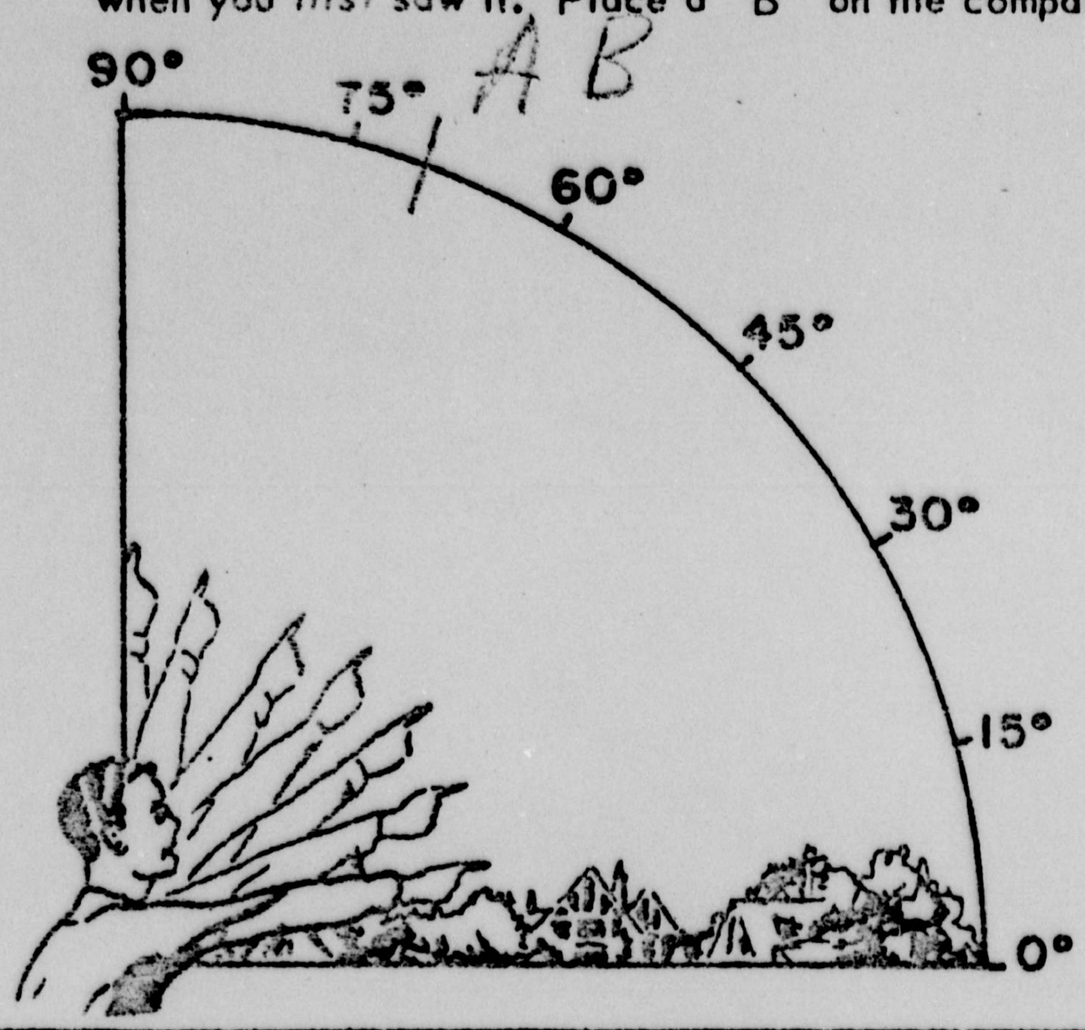
25. Did you observe the object through any of the following?

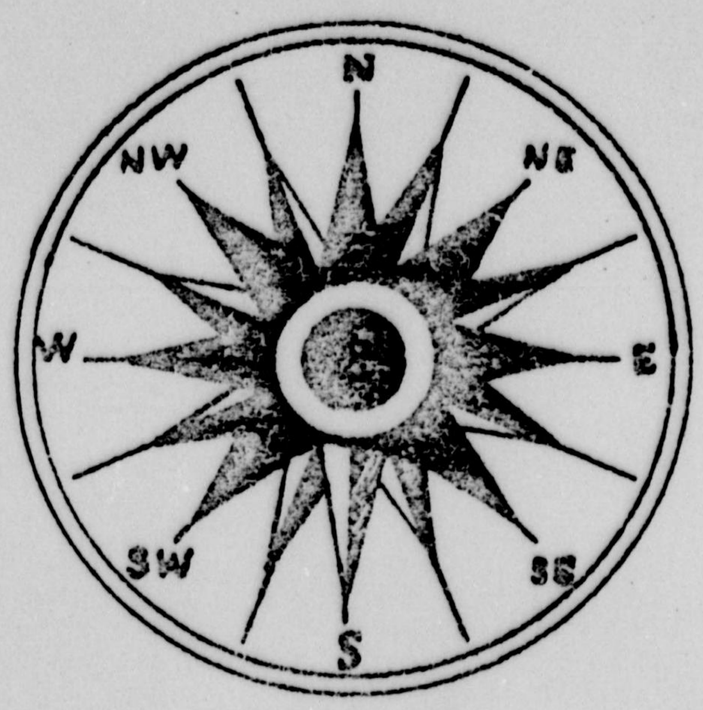
a. Eyeglasses	Yes	(No)	e. Binoculars	(Yes)	No
b. Sun glasses	Yes	(No)	f. Telescope	Yes	(No)
c. Windshield	Yes	(No)	g. Theodolite	Yes	(No)
d. Window glass	Yes	(No)	h. Other _____		

26. 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.

STAR

27. In the following sketch, imagine that you are at the point shown. Place ar "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 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.

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.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

NO

31. Was anyone else with you at the time you saw the object? *(Circle One)* (Yes) No

31.1 IF you answered YES, did they see the object too? *(Circle One)* (Yes) No

31.2 Please list their names and addresses:

[redacted]

CINCINNATI

45227

32. Please give the following information about yourself:

NAME [redacted] [redacted] [redacted]
Last Name First Name Middle Name

ADDRESS [redacted] CINCINNATI 45221 OHIO
Street City Zone State

TELEPHONE NU[redacted] AGE 12 SEX M

Indicate any additional information about yourself, including any special experience, which might be pertinent.

33. When and to whom did you report that you had seen the object?

20 APR 65
Day Month Year