PROJECT 10073 RECORD

	PROJECT TOUTS RECORD
1. DATE - TIME GROUP 230CL 20 Aug 68 21/0300Z	2. LOCATION West Carrollton, Ohio (2 Witnesses)
3. SOURCE Civilians 4. NUMBER OF OBJECTS One	INSUFFICIENT DATA FOR EVALUATION
	AF Form 117 not returned as of 4 Oct 68. 11. BRIEF SUMMARY AND ANALYSIS The observer sighted a twinkling point light source and reported it to the Duty Officer.
Ground-Visual 7. COURSE W 8. PHOTOS	
9. PHYSICAL EVIDENCE 11 Yes XX No	

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

20 Aug 6 8.

FSC,
13

3 SEP 1968

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

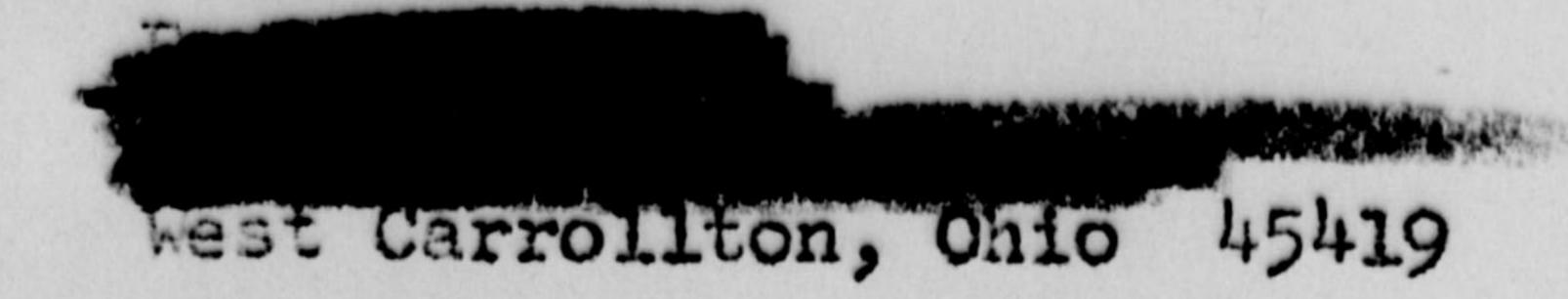
REPLY TO

TDPT (UFO)

SUBJECT:

UFO Observation, 20 August 1968

TO:



Reference your recent unidentified flying object sighting which you reported to the Air Force. The information which we have received is not sufficient for a scientific investigation. Request you complete the attached AF Form 117 and return it in the self-addressed envelope. 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

1 Atch AF Form 117 w/envelope

SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE

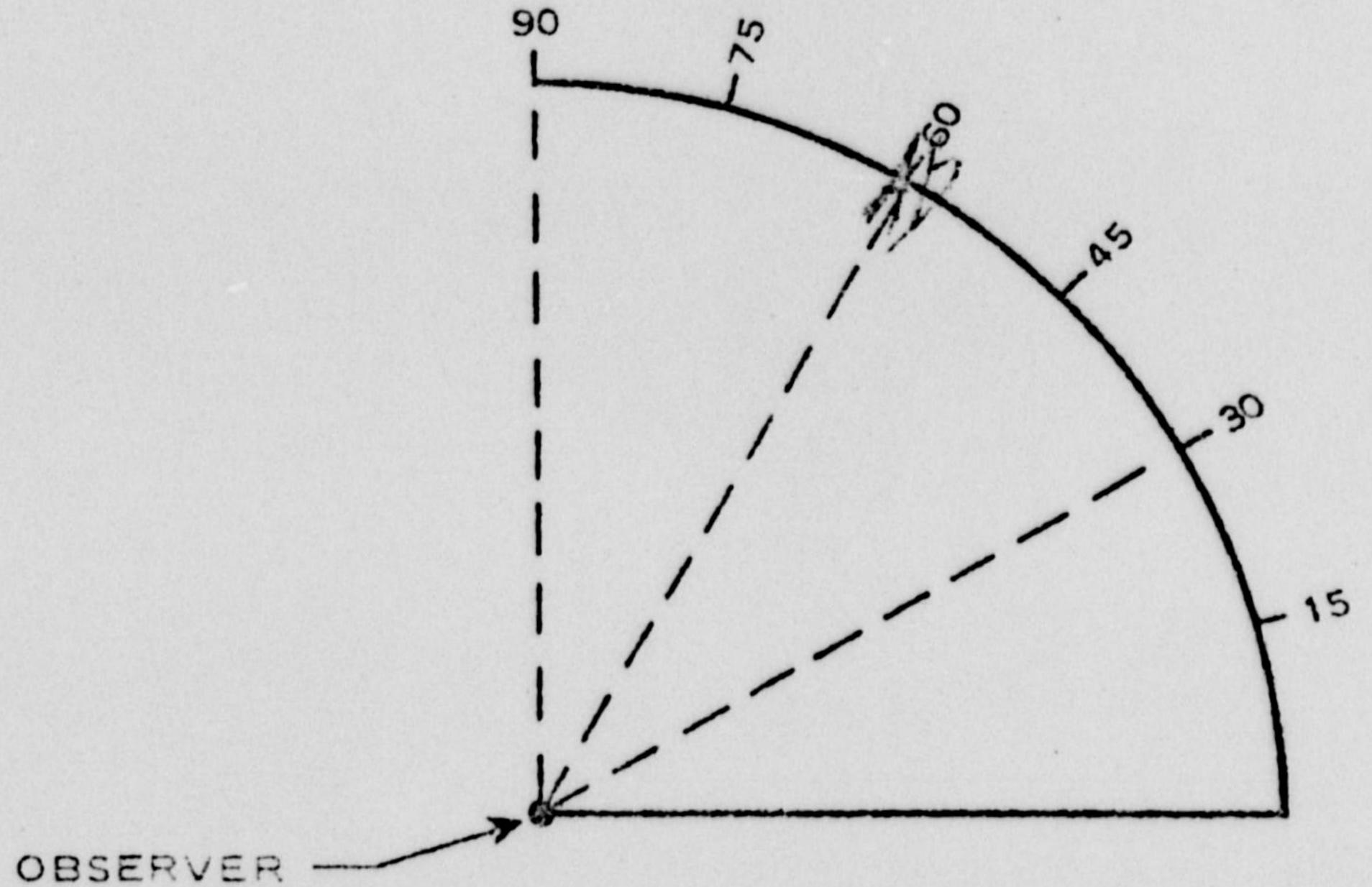
BUDGET BUREAU APPROVAL. NUMBER 21-R258

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.)

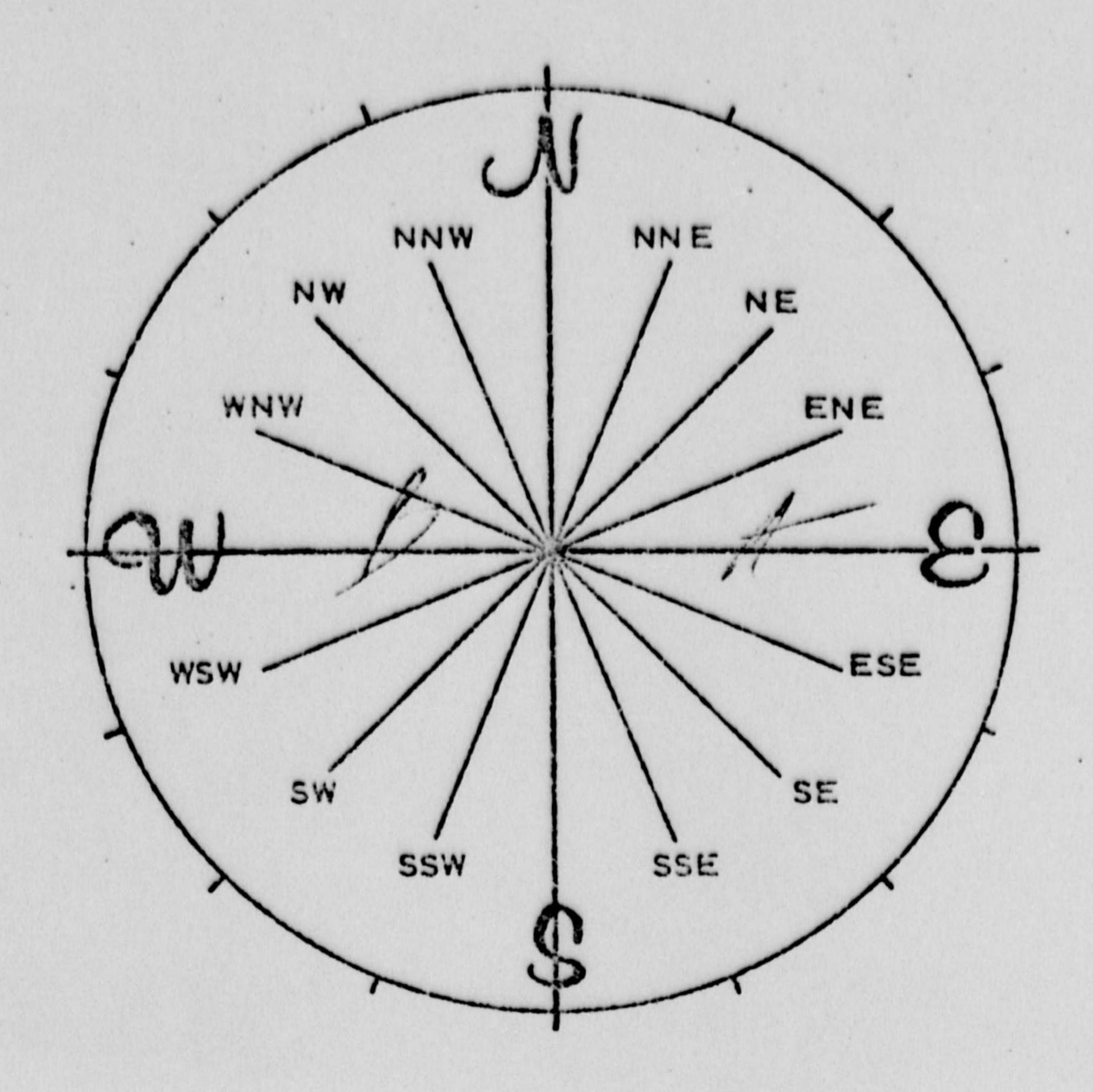
1.	WHEN DID YOU SEE	THE PHENOMENON?	DAY	MONTH Z	16/6 YEAR	- 8
2.	WHAT TIME DID YOU	FIRST SIGHT THE PHE	NOMENON? HOUR 23	MINUTES_	[] A.M.	JYP.M.
3.	WHAT TIME DID YOU	LAST SIGHT THE PHE	NOMENON? HOUR	MINUTES_	(2 % () A.M.	[] P.M.
4.	TIME ZONE	[]DAYL	IGHT SAVINGS	[] STAN	NDARD	
	EASTERN	CENTRAL	MOUNTAIN	PACIFIC	OTHER	
5	A HAND DRAWN MAP	WHERE YOU WERE ST	ENOMENON? IF IN CITY ANDING WITH REFERENCE AS	CE TO THE ADDRESS.	IF IN THE COUNTRY,	IDENTIFY THE

West CAILTON OHIO

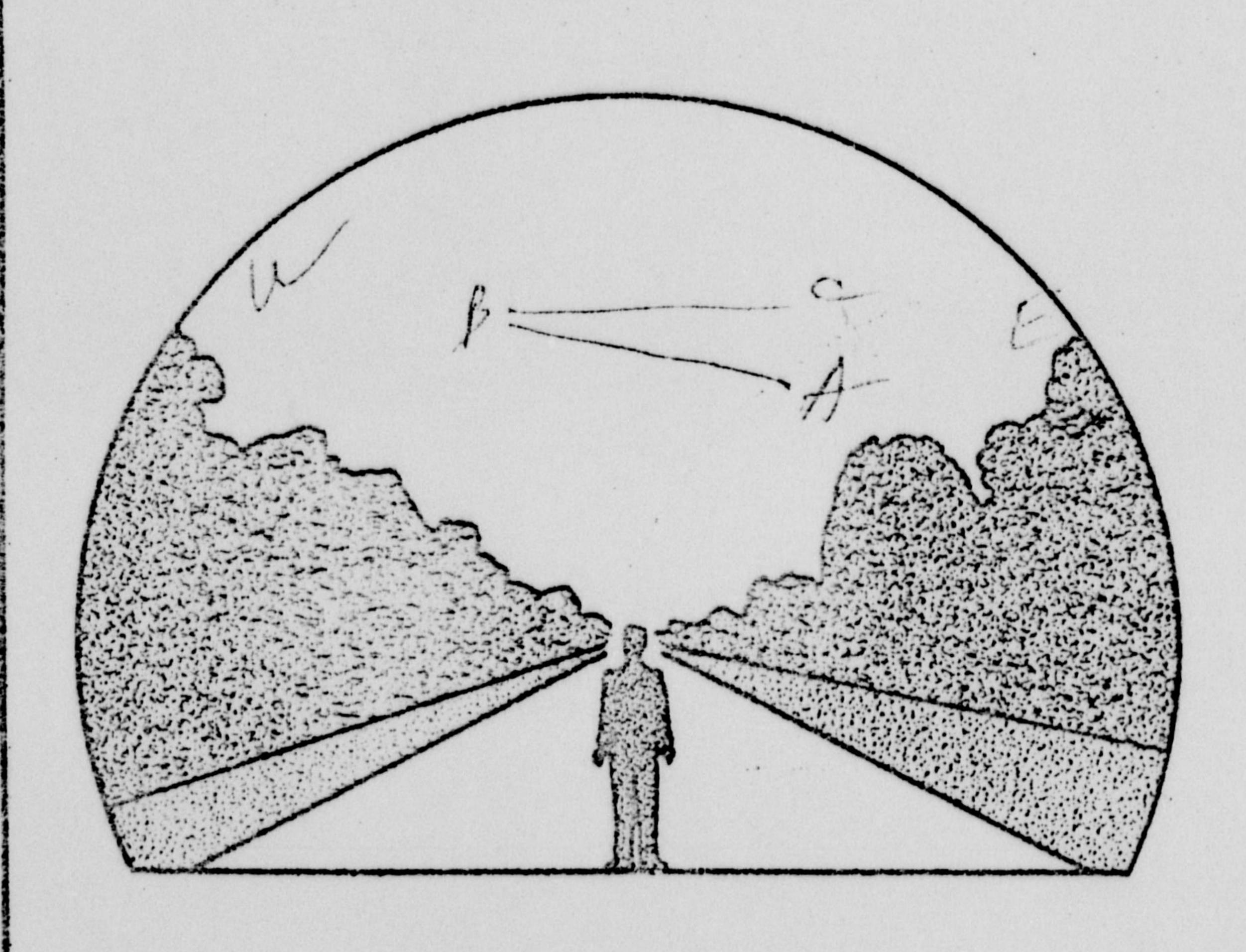
6. IMAGINE YOU ARE AT THE POINT SHOWN IN THE SKETCH, PLACE AN "A" ON THE CURVED LINE TO SHOW HOW HIGH THE PHENOMENON WAS ABOVE THE HORIZON, OR SKYLINE, WHEN FIRST SEEN. PLACE A "B" ON THE SAME CURVED LINE TO SHOW HOW HIGH ABOVE THE HORIZON THE PHENOMENON WAS WHEN LAST SEEN.

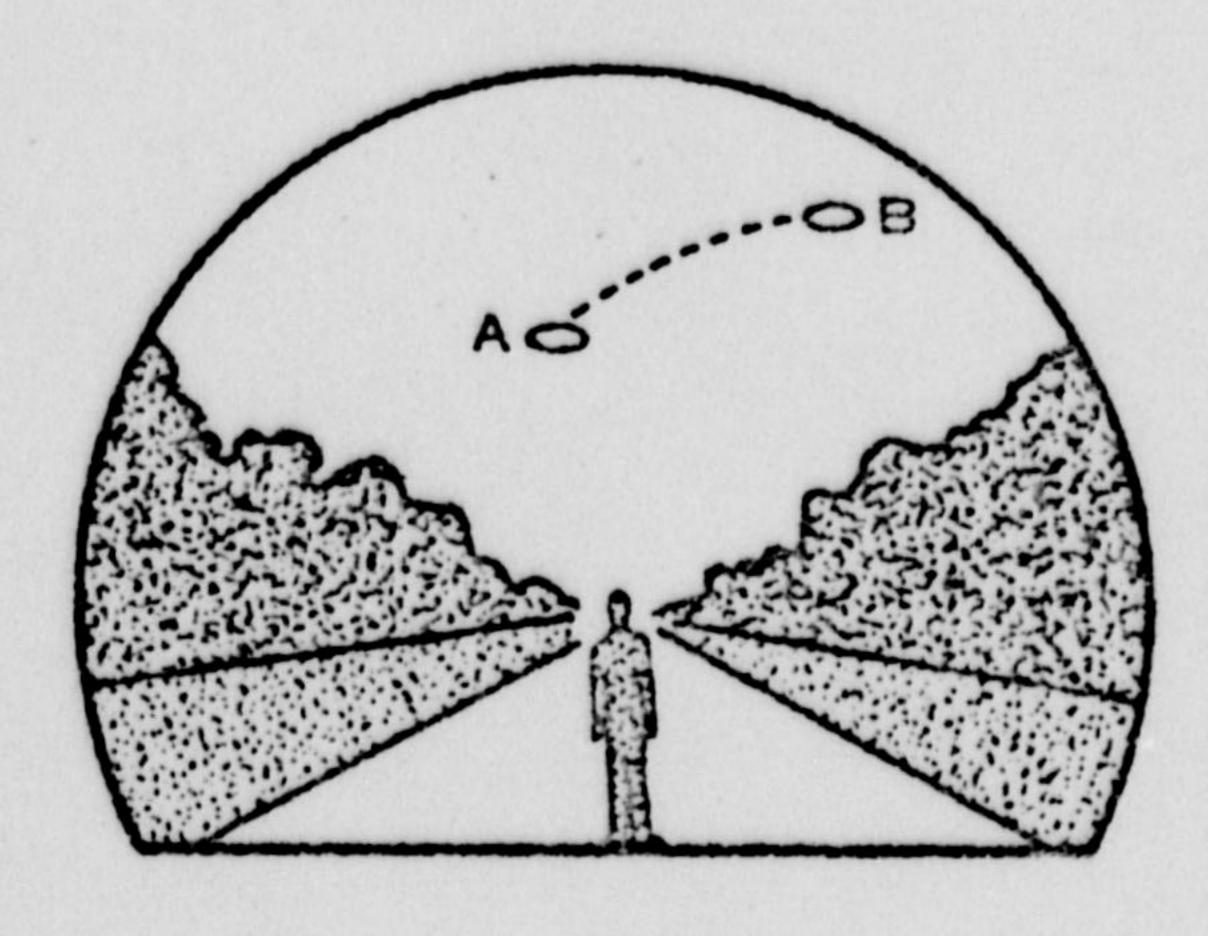


6A. NOW IMAGINE YOU ARE AT THE CENTER OF THE COMPASS ROSE. PLACE AN "A" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN FIRST SEEN. PLACE A "B" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN LAST SEEN.



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 WER	E YOU WHEN YOU SAW THE	PHENOMENON? (Check appropri	inte blocks.)			
Ve DOORS		IN BUSINESS SECTION OF CITY				
VA JN BUILDING		IN RESIDENTIAL SECTION OF CITY				
/ :	FED TO ACCENCED	IN OPEN COUNTRYSIDE				
IN CAR AS DRIV	VER [] AS PASSENGER	NEAR AIRFIELD				
IN BOAT		FLYING OVER CITY				
IN AIRPLANE [] AS PIL	OT [] AS PASSENGER					
OTHER		FLYING OVER OPEN COUN	TRY			
		LOTHER				
A	F YOU WERE IN A VEHICLE	COMPLETE THE FOLLOWING:				
WHAT DIRECTION WER	E YOU MOVING?	HOW FAST WERE YOU MOVING?				
NORTH	EAST					
SOUTH	SOUTH		OBSERVING THE			
NORTHEAST	SOUTHEAST	- PHENOMENON?				
NORTHWEST	SOUTHWEST	TYES	[] NO			
DESCRIBE TYPE OF VEHICLE THE SIGHTING. STATE WHETH		AD, TERRAIN OR BODY OF WATER TOP WERE UP OR DOWN.	YOU TRAVERSED DURING			
DID YOU NOTICE ANY AIRPLAN OF SIGHTING THE PHENOMENCE		* DESCRIBE WHEN THEY WERE IN THE SKY RELATIVE TO THE POSIT	SIGHT RELATIVE TO THE TIME ION OF THE PHENOMENON.			
	fly ing					
1	HOW LONG WAS THE	PHENOMENON IN SIGHT?				
LENGTH OF TIME	11 1 1 V	CERTAIN OF TIME	NOT VERY SURE			
11/1/		FAIRLY CERTAIN	JUST A GUESS			
WAS THE PHENOMENON IN SIG MOVEMENT OR THE BEHAVIOR PEARANCES ON PREVIOUS SKI	OF THE PHENOMENON, AND D	NO. IF "NO," INDICATE WHET	HER THIS IS DUE TO YOUR HAVIOR. INDICATE DISAP-			

1.	CO	NDITIONS (Check appropriate blocks.)		
. SKY	В.	WEATHE	ER	
DAY		CUMULUS CLOUDS (Low fluffy)	-	FOG OR MIST
TWILIGHT		CIRRUS CLOUDS (High fleecy or Herring- bone)	-	HEAVY RAIN
NIGHT				LIGHT RAIN OR DRIZZLE
CLEAR		NIMBUS CLOUDS (Rain)		HAIL
PARTLY CLOUDY		(Thunderstorms)		SNOW OR SLEET
COMPLETELY OVERCAST	***************************************		-	UNKNOWN
THE THE CLOUDE OF A T TWILL		CHE WHAT DID YOU NOTICE ADOLLT THE	1	NONE OF THE ABOVE
t) STARS	TION TOR MI	GHT, WHAT DID YOU NOTICE ABOUT THE		AND MOON?
NONE	121	BRIGHT MOONLIGHT		NO NOONI ICHT
7				NO MOONLIGHT
AFEW		MOON WITH HALO	- X	UNKNOWN
UNKNOWN		PARTIAL (New or quarter)		
	, WAS THE	SUN VISIBLE? TYES NO. IF "YES,"	WHER	E WAS THE SUN AS YOU FACED
THE PHENOMENON?				
		TO YOUR RIGHT		OVERHEAD (Near noon)
IN FRONT OF YOU IN BACK OF YOU E. SPECIFY THE MAJOR SOURCE OF		TO YOUR RIGHT TO YOUR LEFT IATION PRESENT DURING THE SIGHTING, ILLUMINATION, SPECIFY DISTANCE TO L		S THE SUN, HEADLIGHTS OR
IN FRONT OF YOU IN BACK OF YOU SPECIFY THE MAJOR SOURCE OF STREET LAMP, ETC. FOR TER 2. GIVE A BRIEF DESCRIPTION OF REFLECTED LIGHT OR WAS SEED IT WAS SOURCED OR TRANSPARENT	F THE PHE ELF-LUMING NT, WHETH GHT. INDIC	TO YOUR LEFT IATION PRESENT DURING THE SIGHTING, ILLUMINATION, SPECIFY DISTANCE TO L ENOMENON, INDICATING WHETHER IT APP OUS AND WHAT COLORS YOU NOTICED. D ER EDGES WERE SHARP OR FUZZY. DESC	EARED	DARK OR LIGHT, WHETHER IT E YOUR IMPRESSION OF WHETHER IT HE SHAPE OR INDICATE IF IT
IN FRONT OF YOU IN BACK OF YOU SPECIFY THE MAJOR SOURCE OF STREET LAMP, ETC. FOR TER 2. GIVE A BRIEF DESCRIPTION OF REFLECTED LIGHT OR WAS SEED AS A POINT OF LIGHT OF LIGH	F THE PHE ELF-LUMING NT, WHETH GHT. INDIC	TO YOUR LEFT IATION PRESENT DURING THE SIGHTING, ILLUMINATION, SPECIFY DISTANCE TO L ENOMENON, INDICATING WHETHER IT APP DUS AND WHAT COLORS YOU NOTICED. D ER EDGES WERE SHARP OR FUZZY. DESC	EARED ESCRIB CRIBE T ED OBJ	DARK OR LIGHT, WHETHER IT E YOUR IMPRESSION OF WHETH HE SHAPE OR INDICATE IF IT ECTS, LIKE STARS, A LIGHT OR
IN FRONT OF YOU IN BACK OF YOU E. SPECIFY THE MAJOR SOURCE OF STREET LAMP, ETC. FOR TER 2. GIVE A BRIEF DESCRIPTION OF REFLECTED LIGHT OR WAS SELIT WAS SOLID OR TRANSPARENT APPEARED AS A POINT OF LIGHT OTHER OBJECT IN YOUR FIELD.	F THE PHE ELF-LUMING NT, WHETH GHT. INDIC D OF VIEW	TO YOUR LEFT NATION PRESENT DURING THE SIGHTING, ILLUMINATION, SPECIFY DISTANCE TO LE ENOMENON, INDICATING WHETHER IT APP OUS AND WHAT COLORS YOU NOTICED. DE ER EDGES WERE SHARP OR FUZZY. DESC CATE COMPARISONS WITH OTHER OBSERV TO YOUR LEFT TO YOUR L	EARED ESCRIB	DARK OR LIGHT, WHETHER IT E YOUR IMPRESSION OF WHETHER SHAPE OR INDICATE IF IT ECTS, LIKE STARS, A LIGHT OR

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13. DID THE PHENOMENON	YES	NO	UNKNOWN
MOVE IN A STRAIGHT LINE?	K		
STAND STILL AT ANYTIME?	T		
SUDDENLY SPEED UP AND RUN AWAY?	1X		
BREAK UP IN PARTS AND EXPLODE?		1	
CHANGE COLOR?		X	
GIVE OFF SMOKE'			1
CHANGE BRIGHTNESS?	1		
CHANGE SHAPE?			1
FLASH OR FLICKER!	1		,
DISAPPEAR AND REAPPEAR?	12		
SPIN LIKE A TOP?			1000
MAKE A NOISE?		X	
FLUTTER OR WOBBLE? 14. WHAT DREW YOUR ATTENTION TO THE PHENOMENON?		X	
Wife Saw it first			
A. HOW DID IT FINALLY DISAPPEAR?			
B. DID THE PHENOMENON MOVE BEHIND OR IN FRONT OF SOMETHING, LIKE A CLOUD, TREE, OR B	UILDING	AT AN	Y TIME?

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. 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.

	YEGLASSES	CAMERA VIEWER
SI	UNGLASSES	BINOCULARS
W	INDSHIELD	TELESCOPE
SI	DE WINDOW OF VEHICLE	THEODOLITE
W	INDOWPANE	OTHER
00 1	YOU ORDINARILY WEAR GLASSES? TES NO	B. DO YOU USE READING GLASSES?
	AT WAS YOUR IMPRESSION OF THE SPEED OF THE PROMENON? GIVE ESTIMATE OF SPEED	19. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE
WOL	OMMON OBJECT OR OBJECTS WHICH, WHEN PLACED IN T	POSSIBLE OF WHAT YOU SAW, DESCRIBE IN YOUR OWN WORDS THE SKY, SIMILAR TO WHERE YOU NOTED THE PHENOMENON, SCRIBE SIMILARITIES AND DIFFERENCES BETWEEN THE
	Twik ling	STAP-
	/	
21. DI	DYOU NOTICE ANY ODOR, NOISE, OR HEAT EMANATING	FROM THE PHENOMENON OR ANY EFFECT ON YOURSELF. 10. IF "YES," DESCRIBE.
AN		
	THE PHENOMENON DISTURB THE GROUND OR LEAVE A	ANY PHYSICAL EVIDENCE. TYES MINO.
A. DIC	THE PHENOMENON DISTURB THE GROUND OR LEAVE A	ANY PHYSICAL EVIDENCE. TYES NO.
DIC	THE PHENOMENON DISTURB THE GROUND OR LEAVE A	ANY PHYSICAL EVIDENCE. TYES NO.
\ DIC	THE PHENOMENON DISTURB THE GROUND OR LEAVE A	ANY PHYSICAL EVIDENCE. TYES NO.
A. DIC	THE PHENOMENON DISTURB THE GROUND OR LEAVE A	ANY PHYSICAL EVIDENCE. TYES NO.
A. DIC	THE PHENOMENON DISTURB THE GROUND OR LEAVE A	ANY PHYSICAL EVIDENCE. TYES NO.

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22. HAVE YOU EVER SEEN THIS OR A SIMIL AR PHENOMEN LOCATION.	ON BEFORE? []	YES PNO. IF "Y	ES," GIVE DATE	AND
23. WAS ANYONE WITH YOU AT THE TIME YOU SAW THE PI	HENOMENON?	YES NO. IF "	YES,* DID THEY	SEE IT TOO?
A. LIST THEIR NAMES AND ADDRESSES				
wite				
24. GIVE THE FOLLOWING	INFORMATION	ABOUT YOURSEL	F	
LAST NAME, ELBET NAME			1	
ADDRESS		4.57	11/1	21,0
TELE-MONE (Area code and number)	AGE		MALE	FEMALE
INDICATE MANUAL SINK OF INCLUDING OCCUP	ATION AND ANY	EXPERIENCE WHICH	MAY BE PERTI	NENT.
25. WHEN AND TO WHOM DID YOU REPORT THAT YOU HA	D SIGHTED THIS	PHENOMENON?		
NAME	DAY	MONTH	YE	AR
26. DATE YOU COMPLETED THIS QUESTIONNAIRE.	DAY	MONTH	YE	AR