

# PROJECT 10073 RECORD

|                                                                                                |                                                                                                                                                      |
|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. DATE - TIME GROUP<br>19/2215 EDT<br>10 Oct 69 20/0215Z                                      | 2. LOCATION<br>Vinton, Ohio                                                                                                                          |
| 3. SOURCE<br>Civilian                                                                          | 10. CONCLUSION<br>Probable Aircraft                                                                                                                  |
| 4. NUMBER OF OBJECTS<br>One (1)                                                                |                                                                                                                                                      |
| 5. LENGTH OF OBSERVATION<br>3 minutes                                                          | 11. BRIEF SUMMARY AND ANALYSIS<br>The observer sighted red and white flashing lights that traveled from east to north and was visible for 3 minutes. |
| 6. TYPE OF OBSERVATION<br>Ground-Visual                                                        |                                                                                                                                                      |
| 7. COURSE<br>E to N                                                                            |                                                                                                                                                      |
| 8. PHOTOS<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No            |                                                                                                                                                      |
| 9. PHYSICAL EVIDENCE<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |                                                                                                                                                      |

  
October 22, 1969

FTD (TDETR)

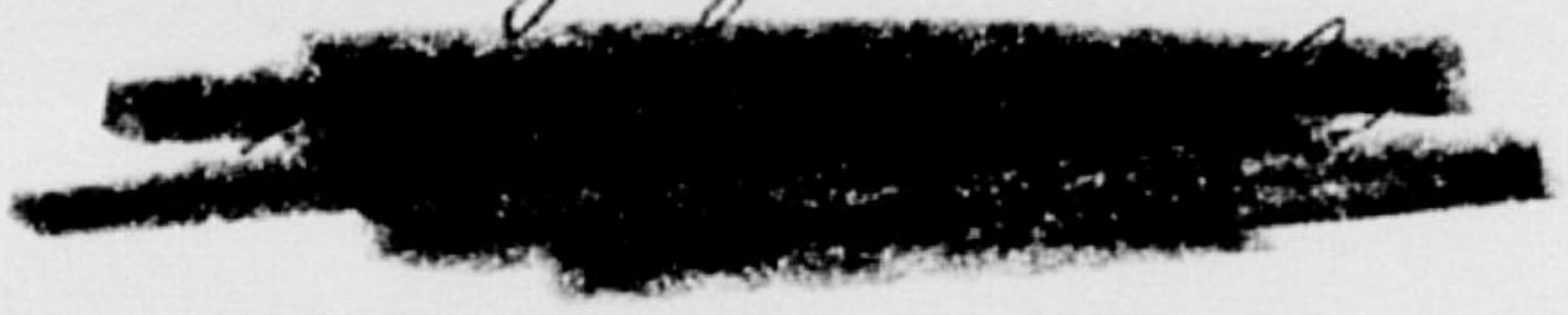
WRIGHT-PATTERSON AFB

Dayton, Ohio 45433

Dear Sir;

Enclosed in this letter is a Unidentified Phenomena Questionnaire on a sighting made October 19, 1969. Because of the extensive sightings made in southern Ohio, I would like to have another copy of the Unidentified Phenomena Questionnaire. As soon as possible I would like a reply to this letter containing the conclusion of the Air Force's evaluation of my report.

Thank you.

Sincerely yours,  


AFR 80-17(C1)

## SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE

BUDGET BUREAU APPROVAL  
NUMBER 11 8154

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 (DETROIT) WRIGHT-PATTERSON AFB, OHIO 45433. 124 AF 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 19 MONTH Oct YEAR 1969

2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON? HOUR 10 MINUTES 15 ☐ A.M. ☒ P.M.

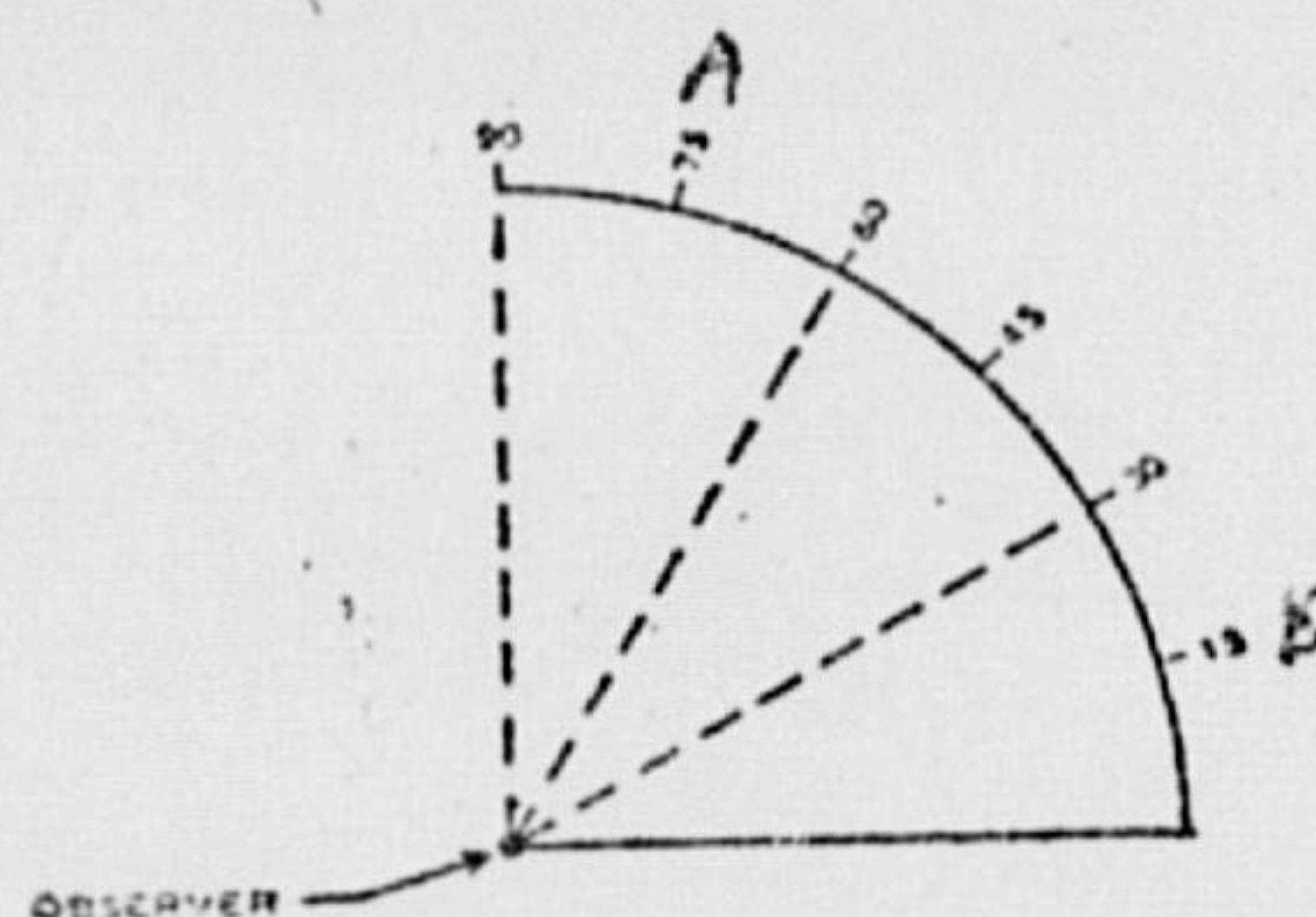
3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON? HOUR 10 MINUTES 18 ☐ A.M. ☒ P.M.

4. TIME ZONE ☒ EASTERN ☐ CENTRAL ☐ DAYLIGHT SAVINGS ☐ MOUNTAIN ☐ PACIFIC ☐ STANDARD ☐ 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 GIVE THE DISTANCE AND DIRECTION FROM SOME RECOGNIZABLE LANDMARK.



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 AN 'B' ON THE SAME CURVED LINE TO SHOW HOW HIGH ABOVE THE HORIZON THE PHENOMENON WAS WHEN LAST SEEN.



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WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? (Check appropriate boxes.)

|                                                                                                              |                                                         |
|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| <input checked="" type="checkbox"/> OUTDOORS                                                                 | <input type="checkbox"/> IN BUSINESS SECTION OF CITY    |
| <input type="checkbox"/> IN BUILDING                                                                         | <input type="checkbox"/> IN RESIDENTIAL SECTION OF CITY |
| <input type="checkbox"/> IN CAR <input type="checkbox"/> AS DRIVER <input type="checkbox"/> AS PASSENGER     | <input type="checkbox"/> IN OPEN COUNTRYSIDE            |
| <input type="checkbox"/> IN BOAT                                                                             | <input type="checkbox"/> NEAR AIRFIELD                  |
| <input type="checkbox"/> IN AIRPLANE <input type="checkbox"/> AS PILOT <input type="checkbox"/> AS PASSENGER | <input type="checkbox"/> FLYING OVER CITY               |
| <input type="checkbox"/> OTHER                                                                               | <input type="checkbox"/> FLYING OVER OPEN COUNTRY       |
|                                                                                                              | <input type="checkbox"/> OTHER                          |

IF YOU WERE IN A VEHICLE, COMPLETE THE FOLLOWING:

|                                 |                           |
|---------------------------------|---------------------------|
| WHAT DIRECTION WERE YOU MOVING? | HOW FAST WERE YOU MOVING? |
| NORTH                           | FAST                      |
| SOUTH                           | MODERATE                  |
| NORTHEAST                       | SLOW                      |
| NORTHWEST                       | SOUTHEAST                 |
|                                 | SOUTHWEST                 |

DID YOU STOP ANYTIME WHILE OBSERVING THE PHENOMENON? ☐ YES ☐ NO

EXPLAIN WHETHER SUCH MOVEMENT AFFECTS YOUR SKETCHES IN ITEMS 6 AND 7.

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?

DO 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.

*The airplane was to the left of the phenomenon.*

HOW LONG WAS THE PHENOMENON IN SIGHT?

|                |                                                    |                                        |
|----------------|----------------------------------------------------|----------------------------------------|
| LENGTH OF TIME | <input type="checkbox"/> CERTAIN OF TIME           | <input type="checkbox"/> NOT VERY SURE |
|                | <input checked="" type="checkbox"/> FAIRLY CERTAIN | <input type="checkbox"/> JUST A GUESS  |

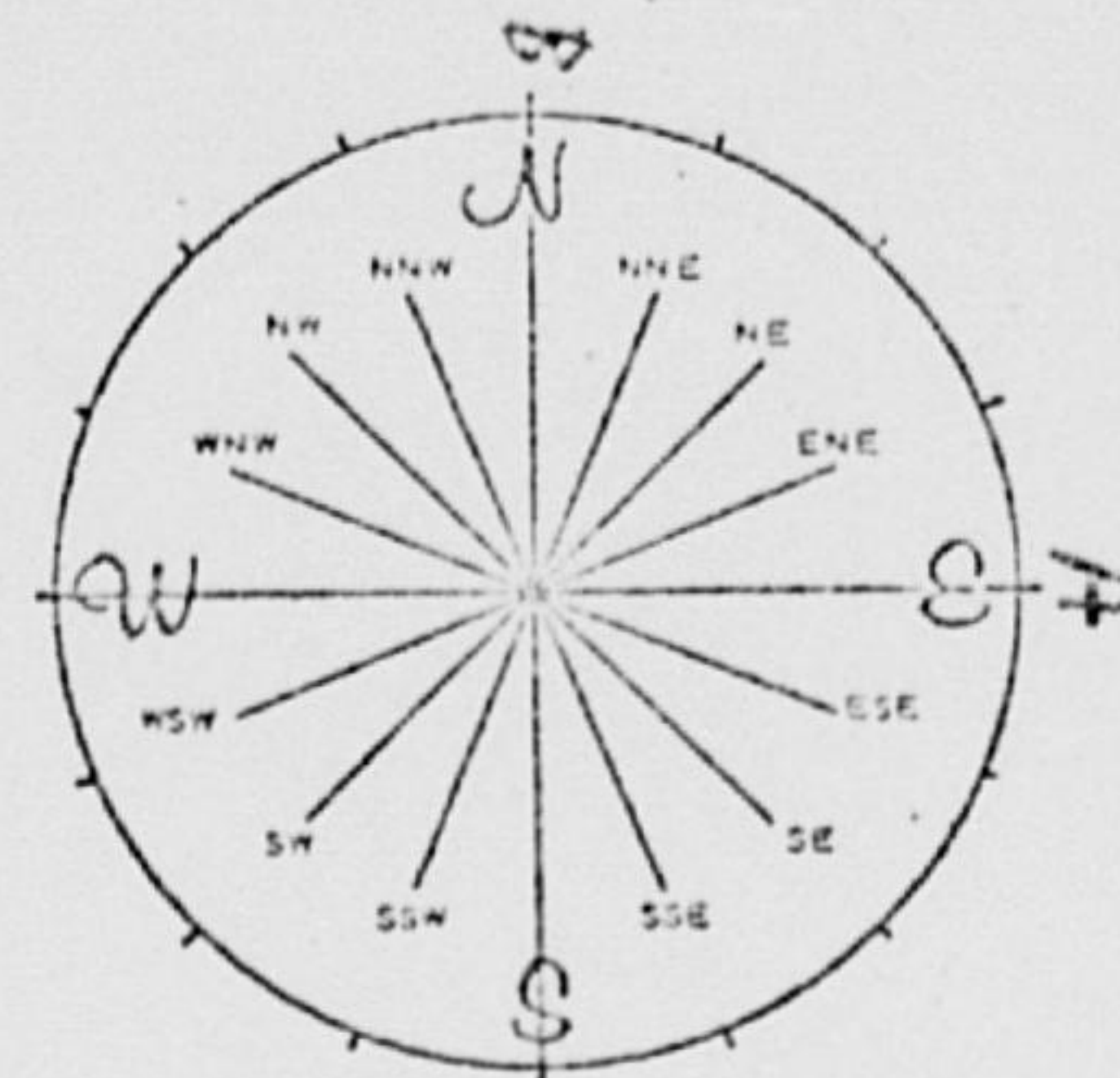
HOW WAS TIME DETERMINED? *clock*

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.

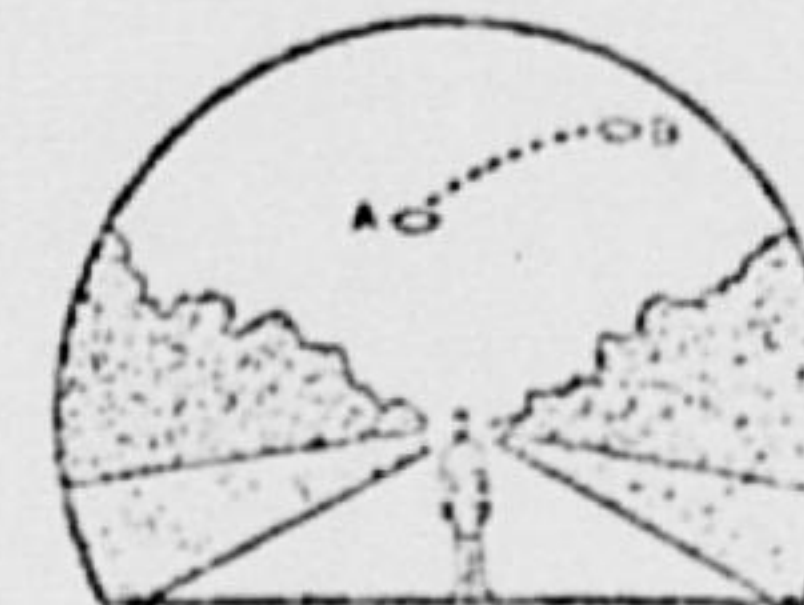
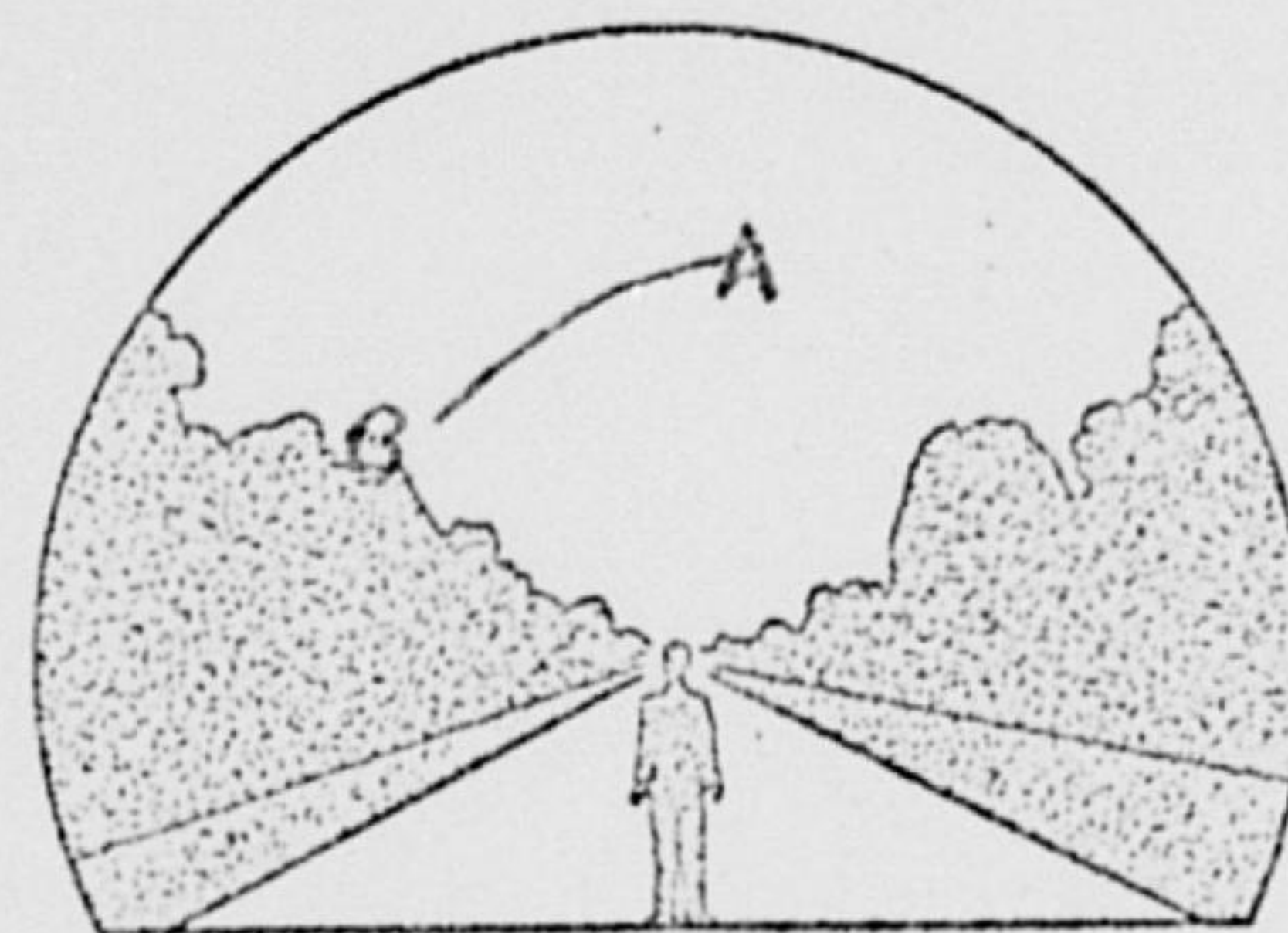
Attachment 1  
(Becomes Attachment 1 to AFR 80-17)

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6. 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.



Attachment 1  
(Becomes Attachment 1 to AFR 80-17)

| DID THE PHENOMENON                 | YES                                 | NO                                  | UNKNOWN                             |
|------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| WAS IN A STRAIGHT LINE?            |                                     | <input checked="" type="checkbox"/> |                                     |
| WAS STILL AT ANY TIME?             |                                     | <input checked="" type="checkbox"/> |                                     |
| DID IT ONLY SPEED UP AND RIN TRAY? |                                     | <input checked="" type="checkbox"/> |                                     |
| WAS IT IN PARTS AND EXPLODE?       | <input checked="" type="checkbox"/> |                                     |                                     |
| WHAT COLOR?                        |                                     |                                     | <input checked="" type="checkbox"/> |
| PROD. SMOKE?                       |                                     |                                     | <input checked="" type="checkbox"/> |
| WAS BRIGHTNESS?                    |                                     | <input checked="" type="checkbox"/> |                                     |
| WAS SHAPED?                        | <input checked="" type="checkbox"/> |                                     |                                     |
| WAS OR FLICKER?                    |                                     | <input checked="" type="checkbox"/> |                                     |
| APPEAR AND HEADPEAR?               |                                     |                                     | <input checked="" type="checkbox"/> |
| WAS IN A TOP?                      |                                     | <input checked="" type="checkbox"/> |                                     |
| WAS ANDISE?                        |                                     | <input checked="" type="checkbox"/> |                                     |
| WAS OR WOBBLER?                    |                                     |                                     | <input checked="" type="checkbox"/> |

CALL YOUR ATTENTION TO THE PHENOMENON

DOES IT FINALLY DISAPPEAR?

DOES THE PHENOMENON MOVE BEHIND OR IN FRONT OF SOMETHING, LIKE A CLOUD, TREE, OR BUILDING AT ANY TIME?

Attachment I

10 IS IT 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?

| CONDITIONS (Use appropriate blocks) |                     |                                         |                       |
|-------------------------------------|---------------------|-----------------------------------------|-----------------------|
| A                                   | Sky                 | D                                       | WEATHER               |
|                                     | DAY                 | CUMULUS CLOUDS (low fluffy)             | FOG OR MIST           |
|                                     | TWILIGHT            | CIRUS CLOUDS (high fleecy or hair-like) | HEAVY RAIN            |
| ✓                                   | NIGHT               |                                         | LIGHT RAIN OR DRIZZLE |
|                                     | CLEAR               | ALBINO CLOUDS (rare)                    | HAIR                  |
|                                     | PARTLY CLOUDY       | CUMULONIMBUS CLOUDS (thunderstorms)     | SNOW OR SLEET         |
|                                     | COMPLETELY OVERCAST | HAZE OR SMOG                            | UNKNOWN               |
|                                     |                     |                                         | 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         | NO MOONLIGHT |
| A FEW     |  | MOON WITH HALO           | UNKNOWN      |
| MANY      |  | MOON HIDDEN BY CLOUDS    |              |
| UNKNOWN   |  | PARTIAL (New or quarter) |              |

Q. IF SIGHTING WAS IN DAYLIGHT, WAS THE SUN VISIBLE? ☐ YES ☒ NO. IF "YES" WHERE WAS THE SUN AS YOU PAIRED THE SUBSOURCES?

| THE PHENOMENON? |  |               |                     |
|-----------------|--|---------------|---------------------|
| IN FRONT OF YOU |  | TO YOUR RIGHT | OVERHEAD (YOU KNOW) |
| IN BACK OF YOU  |  | TO YOUR LEFT  | UNKNOWN             |

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

Outdoor lighting approx. 30 ft

11. 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 ON OTHER OBJECT IN YOUR FIELD OF VIEW.

( UFO - Bright Flashing lights )  
Red And White  
F. STAR  
O Bright star  
Aircplane  
Moon  
O.O. STAR  
Q FAINT STAR  
Trees  
Trees

Attachment 1

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

|                                                 |                                                                |
|-------------------------------------------------|----------------------------------------------------------------|
| <input checked="" type="checkbox"/> EYEGLASSES  | <input type="checkbox"/> CAMERA VIEWER                         |
| <input type="checkbox"/> SUNGLASSES             | <input type="checkbox"/> BINOCULARS                            |
| <input type="checkbox"/> WINDSHIELD             | <input type="checkbox"/> TELESCOPE                             |
| <input type="checkbox"/> SIDE WINDOW OF VEHICLE | <input type="checkbox"/> THEODOLITE                            |
| <input type="checkbox"/> WINDOWPANE             | <input checked="" type="checkbox"/> OTHER <i>Field glasses</i> |

18. DO YOU USUALLY WEAR GLASSES? ☒ YES ☐ NO

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

20. WHAT WAS YOUR IMPRESSION OF THE SPEED OF THE PHENOMENON? GIVE ESTIMATE OF SPEED *2000*

21. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE PHENOMENON? GIVE ESTIMATE OF DISTANCE *2000*

22. 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, WOULD BE MOST SIMILAR TO WHAT YOU NOTED THE PHENOMENON. WOULD BEAR SOME RESEMBLANCE TO WHAT YOU SAW. DESCRIBE SIMILARITIES AND DIFFERENCES BETWEEN THE COMMON OBJECT AND WHAT YOU SAW.

23. 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.

*Dogs barking.*

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

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Attachment 1  
(Becomes Attachment 1 to AFR 80-17)

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



26. 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. HOW 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.

$\frac{1}{4}$

Attachment 1  
(Becomes Attachment 1 to AFR 80-17)

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

There was A Aircraft flying in the vicinity, but to the left of the object.

Also, in the vicinity of the sighting are high tension wires.

MADE WITH A-104-6

Attachment 1  
(Becomes Attachment 1 to AFR 80-17)

AFR 80-17(C1)

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

21. HAS ANYONE WITH YOU AT THE TIME OF THE PHENOMENON? ☒ YES ☐ NO. IF "YES," DID THEY SEE IT TOO?

A. LIST THEIR NAMES AND ADDRESSES.

22. GIVE THE FOLLOWING:

LAST NAME, FIRST NAME, MIDDLE NAME

ADDRESS (Street, City, State and Zip Code)

TELEPHONE (Area code and number)

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

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

NAME ☒ DAY 20 MONTH Oct YEAR 1969

DAY 20 MONTH Oct YEAR 1969

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Attachment 1  
(Becomes Attachment 1 to AFR 80-17)

Proposed reply to letter from [REDACTED], dtd 22 Oct 1969.

1. Reference your letter of 22 Oct 1969. From your description of the object, the flight path, and duration of the sighting, we feel that there is no evidence that the sighting could not have been of an aircraft.
2. We are enclosing a Blue Book which we hope you may find interesting.