

PROJECT 10073 RECORD CARD

1. DATE 18 Feb 59	2. LOCATION Dayton, Ohio		12. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon
3. DATE-TIME GROUP Local _____ GMT 19/0225Z	4. TYPE OF OBSERVATION <input checked="" type="checkbox"/> Ground-Visual Binoculars <input type="checkbox"/> Air-Visual <input type="checkbox"/> Ground-Radar <input type="checkbox"/> Air-Intercept Radar		<input type="checkbox"/> Was Aircraft <input type="checkbox"/> Probably Aircraft <input type="checkbox"/> Possibly Aircraft
5. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6. SOURCE Civilian		<input checked="" type="checkbox"/> Was Astronomical Sirius <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical
7. LENGTH OF OBSERVATION one hour 5 min	8. NUMBER OF OBJECTS one	9. COURSE West	<input type="checkbox"/> Other _____ <input type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown
10. BRIEF SUMMARY OF SIGHTING Round, red and blue obj, looked like a large bright star. Appeared to move from side to side and turn. After one hour was still visible, but appeared smaller and still varied in color through binoculars. Seemed to have protuberances.		11. COMMENTS Adult observer was under impression obj was a star, but her son's curiosity wasn't satisfied. A check with astro charts shows the star Sirius to be in exact location given.	

U. S. AIR FORCE TECHNICAL INFORMATION SHEET

(SUMMARY DATA)

In order that your information may be filed and coded as accurately as possible, please use the following space to write out a short description of the event that you observed. You may repeat information that you have already given in the questionnaire, and add any further comments, statements, or sketches that you believe are important. Try to present the details of the observation in the order in which they occurred. Additional pages of the same size paper may be attached if they are needed.

NAME Mrs. David Deak
(Please Print)

(Do Not Write in This Space)

CODE:

SIGNATURE _____

DATE _____

Boy saw object out window and called his mother. Both observed object. Object seemed to change colors from blue, red, to white and it appeared to move from side to side and turn. Stayed at 10 o'clock. One hour still visible, but is much smaller and still varies in color when observed through binoculars. Did not appear round but seemed to have protuberances according to Mrs. Deak

PROJECT 10073 RECORD CARD

1. DATE 18 Feb 59	2. LOCATION Dayton, Ohio		12. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon
3. DATE-TIME GROUP Local _____ GMT 19/0340Z	4. TYPE OF OBSERVATION <input checked="" type="checkbox"/> Ground-Visual <input type="checkbox"/> Ground-Radar <input type="checkbox"/> Air-Visual <input type="checkbox"/> Air-Intercept Radar		<input type="checkbox"/> Was Aircraft <input type="checkbox"/> Probably Aircraft <input type="checkbox"/> Possibly Aircraft
5. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6. SOURCE Civilian		<input checked="" type="checkbox"/> Was Astronomical Meteor <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical
7. LENGTH OF OBSERVATION 5-10 secs	8. NUMBER OF OBJECTS one	9. COURSE falling	<input type="checkbox"/> Other _____ <input type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown
10. BRIEF SUMMARY OF SIGHTING Round obj size of basketball at arms length, color orange-yellowish, looked like a ball of fire falling vertically, was sighted fairly low above horizon.		11. COMMENTS The description, time, duration, and flight path is typical of a meteor.	

Questionnaire filled by ATIC Duty Officer from
phone conversation. Lt. Gerald F. Malone
ATIC 500 (8 FEB 59)

U. S. AIR FORCE TECHNICAL INFORMATION SHEET

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, and will be regarded as confidential material. 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?

18 Day Feb Month 59 Year

2. Time of day:

10 Hour 40 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] Nearest Postal Address DAYTON City or Town OHIO State or Country

Additional remarks: _____

5. Estimate how long you saw the object.

_____ Hours _____ Minutes 5-10 Seconds

5.1 Circle one of the following to indicate how certain you are of your answer to Question 5.

a. Certain c. Not very sure
b. Fairly certain d. Just a guess

6. What was the condition of the sky?

(Circle One): a. Bright daylight d. Just a trace of daylight
b. Dull daylight e. No trace of daylight
c. Bright twilight f. Don't remember

7. IF you saw the object during DAYLIGHT, TWILIGHT, or DAWN, where was the SUN located as you looked at the object?

(Circle One): a. In front of you d. To your left
b. In back of you e. Overhead
c. To your right f. Don't remember

8. IF you saw the object, at NIGHT, TWILIGHT, or DAWN, 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. Was the object brighter than the background of the sky?

(Circle One):

a. Yes

b. No

c. Don't remember

10. IF It was BRIGHTER THAN the sky background, was the brightness like that of an automobile headlight?:

(Circle One) a. A mile or more away (a distant car)?

- b. Several blocks away?
- c. A block away?
- d. Several yards away?
- e. Other

11. Did the object:

(Circle One for each question)

- | | | | |
|---|-----|-------------------------------------|------------|
| a. Appear to stand still at any time? | Yes | <input checked="" type="radio"/> No | Don't Know |
| b. Suddenly speed up and rush away at any time? | Yes | <input checked="" type="radio"/> No | Don't Know |
| c. Break up into parts or explode? | Yes | <input checked="" type="radio"/> No | Don't Know |
| d. Give off smoke? | Yes | <input checked="" type="radio"/> No | Don't Know |
| e. Change brightness? | Yes | <input checked="" type="radio"/> No | Don't Know |
| f. Change shape? | Yes | <input checked="" type="radio"/> No | Don't Know |
| g. Flicker, throb, or pulsate? | Yes | ? No | Don't Know |

12. Did the object move behind something at anytime, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

It moved behind: _____

13. Did the object move in front of something at anytime, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, than tell what

It moved in front of: _____

14. Did the object appear:

(Circle One):

a. Solid?

firey

b. Transparent?

c. Don't Know.

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

- | | | | | | |
|--|-----|----|----------------------|-----|----|
| <input checked="" type="radio"/> 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 <i>eyes</i> | | |

16. Tell in a few words the following things about the object.

a. Sound _____

b. Color Orange-yellowish

17. 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.

18. 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 _____

19. 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.

20. 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.

one direction - falling vertically

21. IF POSSIBLE, try to guess or estimate what the real size of the object was in its longest dimension, (no estimate) feet. *larger than football or basketball*

22. How large did the object or objects appear as compared with one of the following objects held in the hand and at about arm's length?

(Circle One):

- a. Head of a pin
b. Pea
c. Dime
d. Nickel
e. Quarter
f. Half dollar

- g. Silver dollar
h. Baseball
i. Grapefruit
j. Basketball
k. Other uncertain

- 22.1 (Circle One of the following to indicate how certain you are of your answer to Question 22.)

- a. Certain
b. Fairly certain

- c. Not very sure
d. Uncertain

23. How did the object or objects disappear from view?

Went down behind houses

24. In order that you can give as clear a picture as possible of what you saw, we would like for you to imagine that you could construct the object that you saw. Of what type material would you make it? How large would it be, and what shape would it have? 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.

Basketball size and shape but had the appearance of fire. Could be larger. Looked like ball of fire.

25. 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
- e. At sea
- f. Other _____

26. 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. Flying near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other _____

27. What were you doing at the time you saw the object, and how did you happen to notice it?

Walking dog in yard

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

28.1 What direction were you moving? (Circle One)

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

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

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

(Circle One) Yes No

29. What direction were you looking when you first saw the object? (Circle One)

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

30. What direction were you looking when you last saw the object? (Circle One)

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

31. If you are familiar with bearing terms (angular direction), try to estimate the number of degrees the object was from true North and also the number of degrees it was upward from the horizon (elevation).

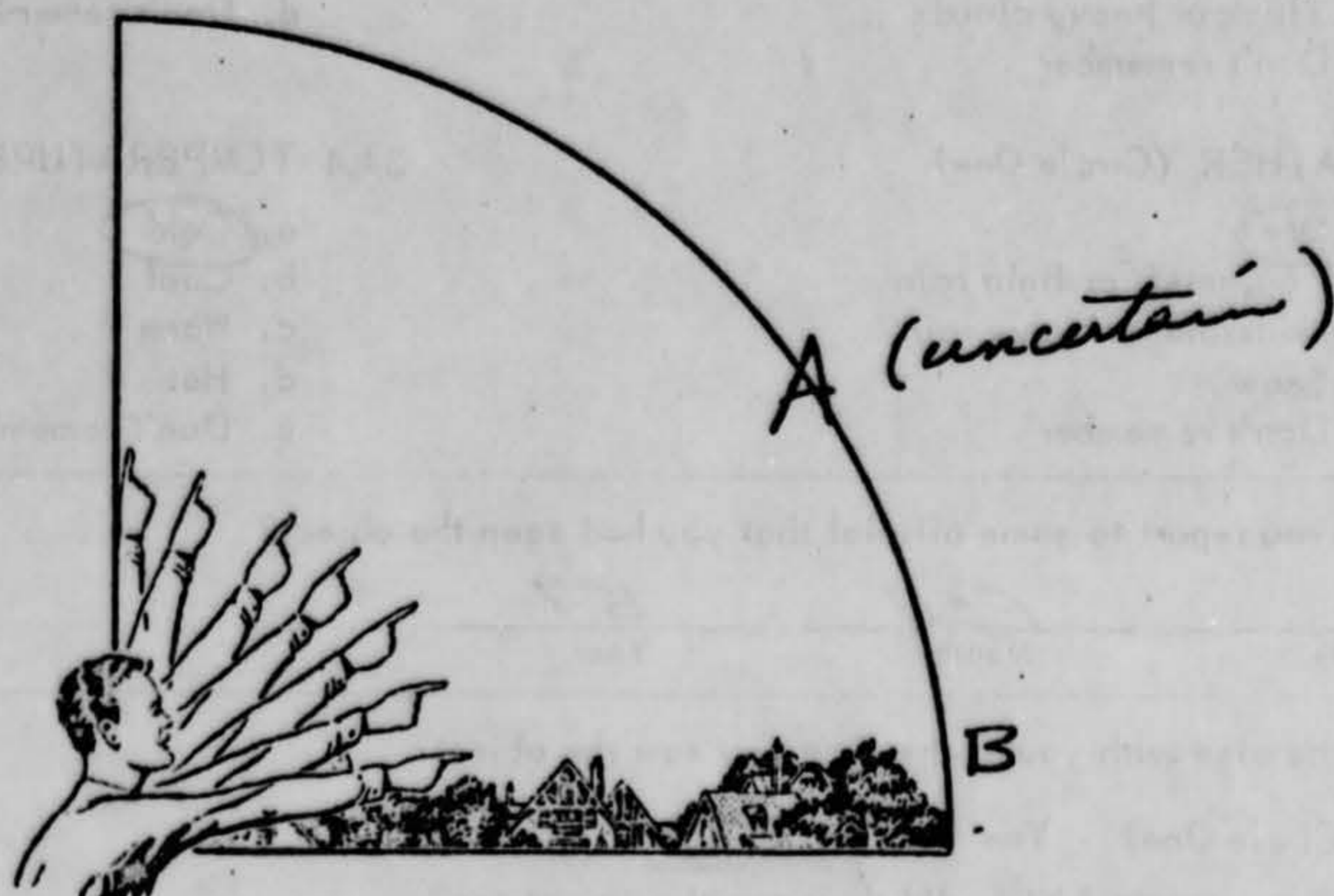
31.1 When it first appeared:

- a. From true North _____ degrees.
- b. From horizon _____ degrees. *fairly low*

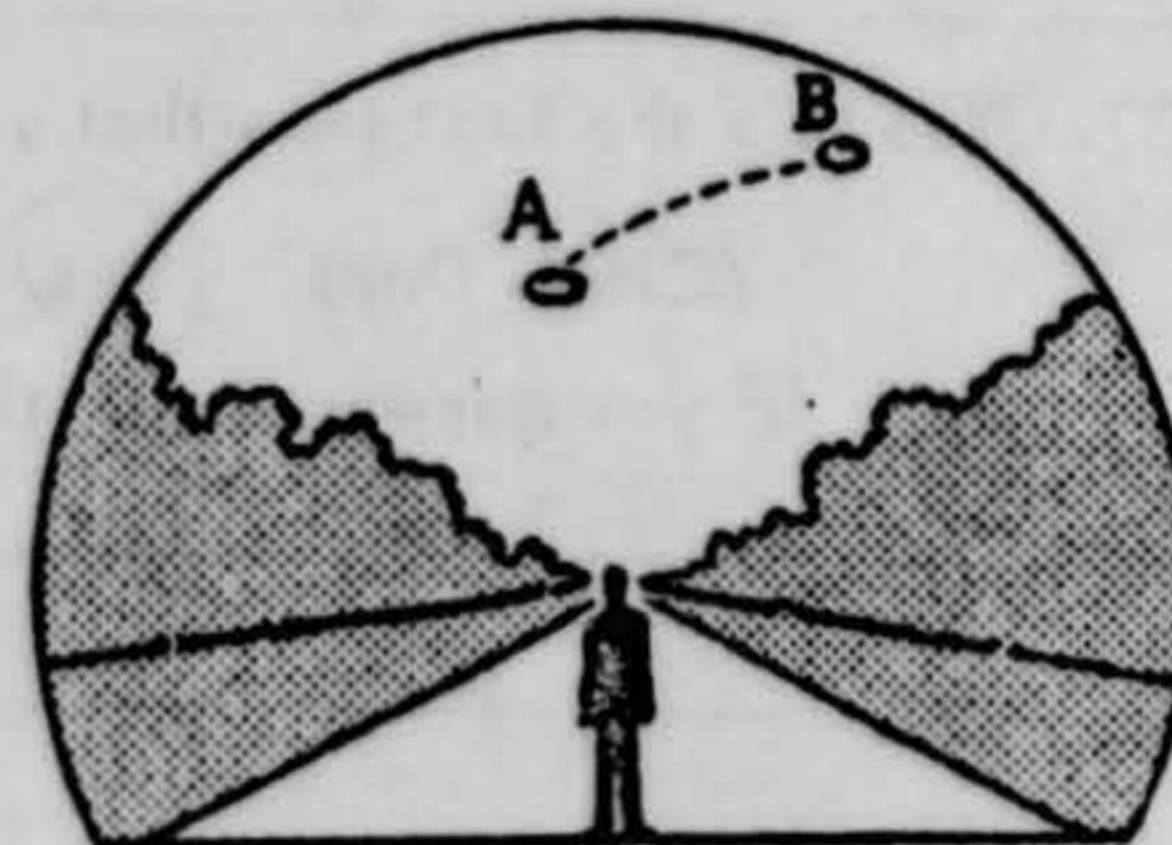
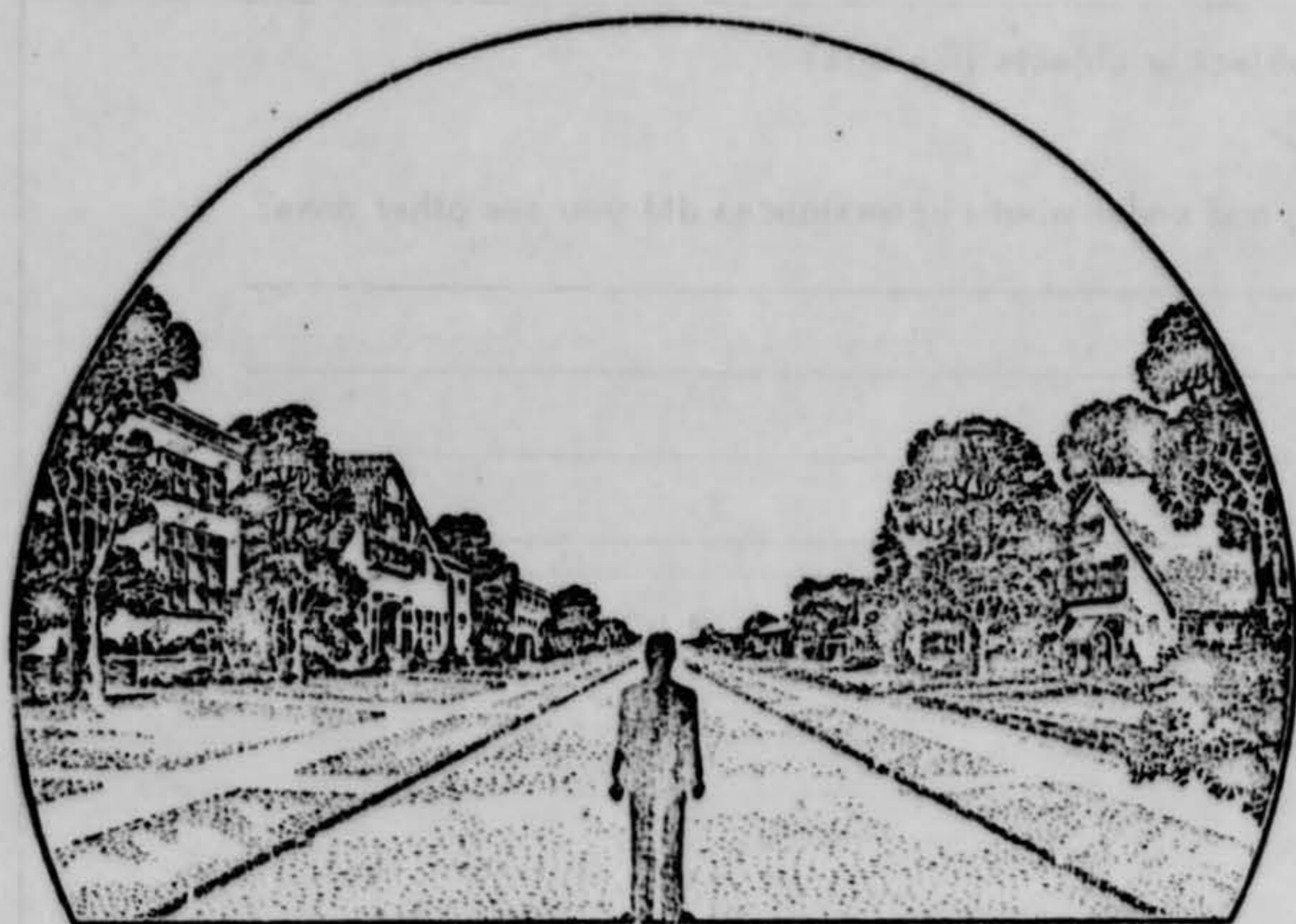
31.2 When it disappeared:

- a. From true North _____ degrees.
- b. From horizon _____ degrees. *below*

32. 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.



33. In the following larger sketch place an "A" at the position the object was when you *first* saw it, and a "B" at its position when you *last* saw it. Refer to smaller sketch as an example of how to complete the larger sketch.



34. What were the weather conditions at the time you saw the object?

34.1 CLOUDS (Circle One)

- a. Clear sky
- b. Hazy
- Scattered clouds
- d. Thick or heavy clouds
- e. Don't remember

34.2 WIND (Circle One)

- a. No wind
- Slight breeze
- c. Strong wind
- d. Don't remember

34.3 WEATHER (Circle One)

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

34.4 TEMPERATURE (Circle One)

- a. Cold
- b. Cool
- c. Warm
- d. Hot
- e. Don't remember

35. When did you report to some official that you had seen the object?

18 Day FEB Month 57 Year

36. Was anyone else with you at the time you saw the object?

(Circle One) Yes No

36.1 IF you answered YES, did they see the object too?

(Circle One) Yes No

36.2 Please list their names and addresses:

37. Was this the first time that you had seen an object or objects like this?

(Circle One) Yes

37.1 IF you answered NO, then when, where, and under what circumstances did you see other ones?

38. In your opinion what do you think the object was and what might have caused it?

none

39. 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?

very fast m.p.h.

40. 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?

_____ feet.

41. Please give the following information about yourself:

NAME _____
Last Name First Name Middle Name

ADDRESS _____
Street City Zone State

TELEPHONE NUMBER _____

What is your present job? Retired

Age 74 Sex MALE

Please indicate any special educational training that you have had.

- a. Grade school
- b. High school
- c. College _____
- d. Post graduate _____
- e. e. Technical school _____
(Type) _____
- f. Other special training _____

42. Date you completed this questionnaire:

18 FEB 59
Day Month Year

Questionnaire filled by ATIC Duty Officer from
phone conversation. H. Gerald F. Mahone
ATIC SDD 18FEB57

U. S. AIR FORCE TECHNICAL INFORMATION SHEET

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, and will be regarded as confidential material. 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?

18 Feb 57
Day Month Year

2. Time of day:

9 25
Hour Minutes

(Circle One): A.M. or P.M.

3. Time zone:

(Circle One): a. Eastern
b. Central
c. Mountain
d. Pacific
e. Other _____

2/25
(Circle One): a. Daylight Saving
b. Standard

4. Where were you when you saw the object?

[REDACTED] DAYTON 4 Ohio
Nearest Postal Address City or Town State or Country

Additional remarks: _____

5. Estimate how long you saw the object.

1 5 _____
Hours Minutes Seconds

5.1 Circle one of the following to indicate how certain you are of your answer to Question 5.

a. Certain c. Not very sure
b. Fairly certain d. Just a guess

6. What was the condition of the sky?

(Circle One): a. Bright daylight
b. Dull daylight
c. Bright twilight
d. Just a trace of daylight
e. No trace of daylight
f. Don't remember

moonlight

7. IF you saw the object during DAYLIGHT, TWILIGHT, or DAWN, 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

U. S. AIR FORCE TECHNICAL INFORMATION SHEET

(SUMMARY DATA)

In order that your information may be filed and coded as accurately as possible, please use the following space to write out a short description of the event that you observed. You may repeat information that you have already given in the questionnaire, and add any further comments, statements, or sketches that you believe are important. Try to present the details of the observation in the order in which they occurred. Additional pages of the same size paper may be attached if they are needed.

NAME _____
(Please Print)

(Do Not Write in This Space)

CODE:

SIGNATURE _____

DATE _____

Walking dog in yard about 10:40 PM and saw a fiery object falling. It was observed for only a few seconds as it fell from fairly low in the sky till it disappeared below horizon. It seemed to be basketball sized and was yellowish-orange, giving the appearance of having a fiery composition. Unable to tell how far away because estimating distance is tricky.

8. IF you saw the object, at NIGHT, TWILIGHT, or DAWN, 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. Was the object brighter than the background of the sky?

(Circle One):

- a. Yes
- b. No
- c. Don't remember

10. IF it was BRIGHTER THAN the sky background, was the brightness like that of an automobile headlight?:

(Circle One) a. A mile or more away (a distant car)?

- b. Several blocks away?
- c. A block away?
- d. Several yards away?
- e. Other

11. Did the object:

(Circle One for each question)

- | | | | |
|---|------------|-----------|------------|
| a. Appear to stand still at any time? | <u>Yes</u> | No | Don't Know |
| b. Suddenly speed up and rush away at any time? | Yes | <u>No</u> | Don't Know |
| c. Break up into parts or explode? | Yes | <u>No</u> | Don't Know |
| d. Give off smoke? | Yes | <u>No</u> | Don't Know |
| e. Change brightness? | <u>Yes</u> | No | Don't Know |
| f. Change shape? | Yes | <u>No</u> | Don't Know |
| g. Flicker, throb, or pulsate? | <u>Yes</u> | No | Don't Know |

12. Did the object move behind something at anytime, particularly a cloud?

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

13. Did the object move in front of something at anytime, particularly a cloud?

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

14. Did the object appear: (Circle One): a. Solid? b. Transparent? c. Don't Know.

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

- | | | | | | | |
|-----------------|-----|----|---------------|------------|----|--------------|
| a. Eyeglasses | Yes | No | e. Binoculars | <u>Yes</u> | No | <i>small</i> |
| b. Sun glasses | Yes | No | f. Telescope | Yes | No | |
| c. Windshield | Yes | No | g. Theodolite | Yes | No | |
| d. Window glass | Yes | No | h. Other | <u>eye</u> | | |

16. Tell in a few words the following things about the object.

a. Sound none

b. Color red & blue at once

17. 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.

round to eye & with fins

18. The edges of the object were:

(Circle One): a. Fuzzy or blurred

b. Like a bright star

c. Sharply outlined

d. Don't remember

large

e. Other

Through fins

showed redd blue

19. IF there was MORE THAN ONE object, then how many were there? one
Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

20. 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.

direction varied

21. IF POSSIBLE, try to guess or estimate what the real size of the object was in its longest dimension.
none feet.

22. How large did the object or objects appear as compared with one of the following objects held in the hand and at about arm's length?

(Circle One):

- | | |
|--|------------------|
| a. Head of a pin | g. Silver dollar |
| b. Pea <input checked="" type="checkbox"/> | h. Baseball |
| c. Dime | i. Grapefruit |
| d. Nickel | j. Basketball |
| e. Quarter | k. Other _____ |
| f. Half dollar | |

- 22.1 (Circle One of the following to indicate how certain you are of your answer to Question 22.

- | | |
|-------------------|------------------|
| a. Certain | c. Not very sure |
| b. Fairly certain | d. Uncertain |

23. How did the object or objects disappear from view? no

24. In order that you can give as clear a picture as possible of what you saw, we would like for you to imagine that you could construct the object that you saw. Of what type material would you make it? How large would it be, and what shape would it have? 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.

round

25. 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
 e. At sea
 f. Other _____

26. 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. Flying near an airfield?
 e. Flying over a city?
 f. Flying over open country?
 g. Other near WPAFB

27. What were you doing at the time you saw the object, and how did you happen to notice it?

Getting water in kitchen

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

28.1 What direction were you moving? (Circle One)

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

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

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

(Circle One) Yes No

29. What direction were you looking when you first saw the object? (Circle One)

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

30. What direction were you looking when you last saw the object? (Circle One)

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

31. If you are familiar with bearing terms (angular direction), try to estimate the number of degrees the object was from true North and also the number of degrees it was upward from the horizon (elevation).

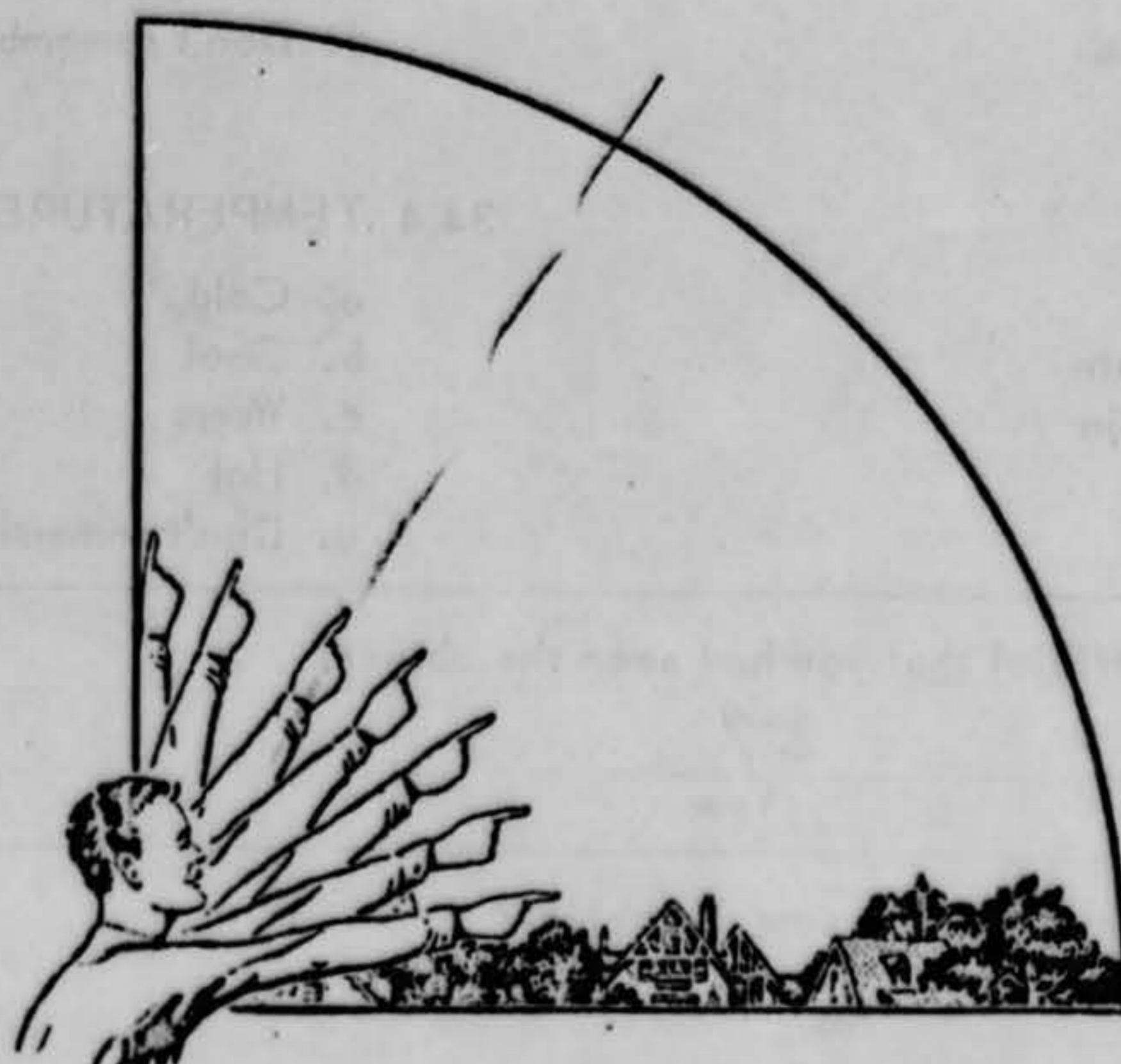
31.1 When it first appeared:

- a. From true North _____ degrees.
 b. From horizon _____ degrees.

31.2 When it disappeared:

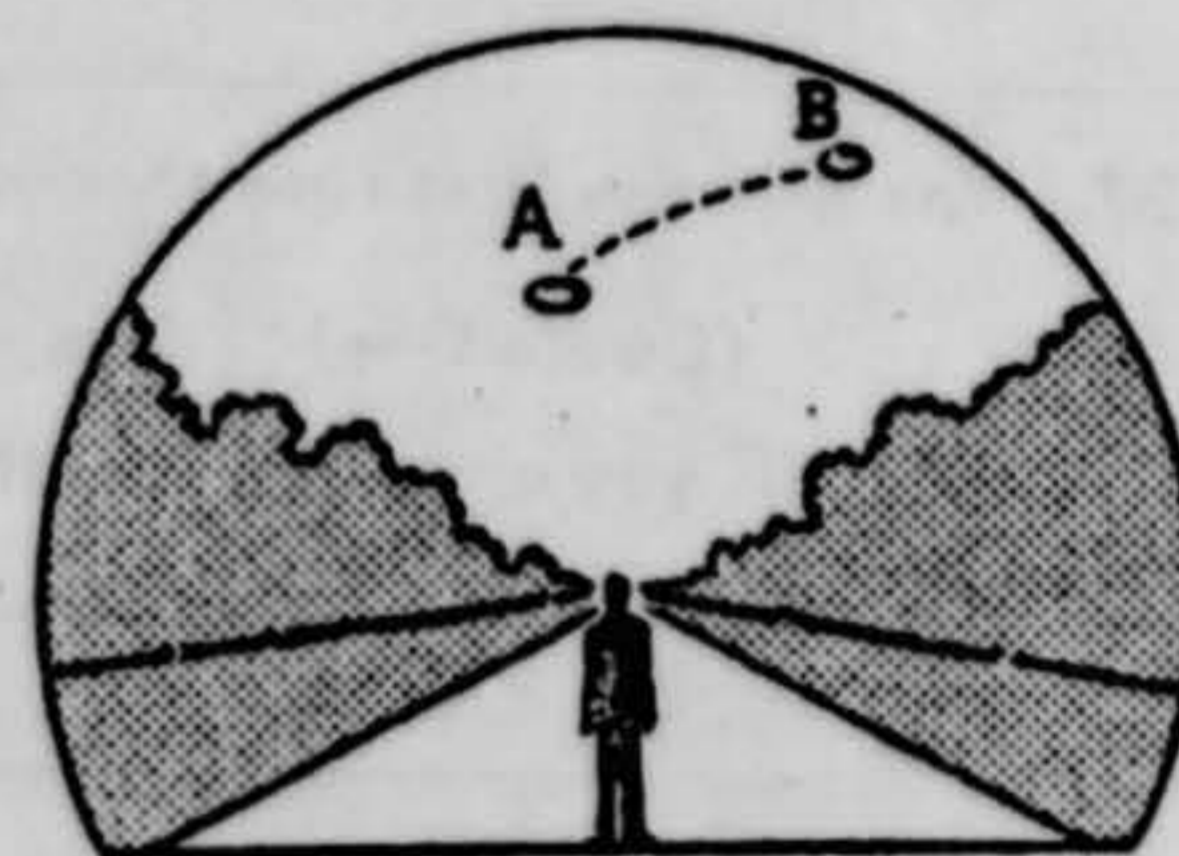
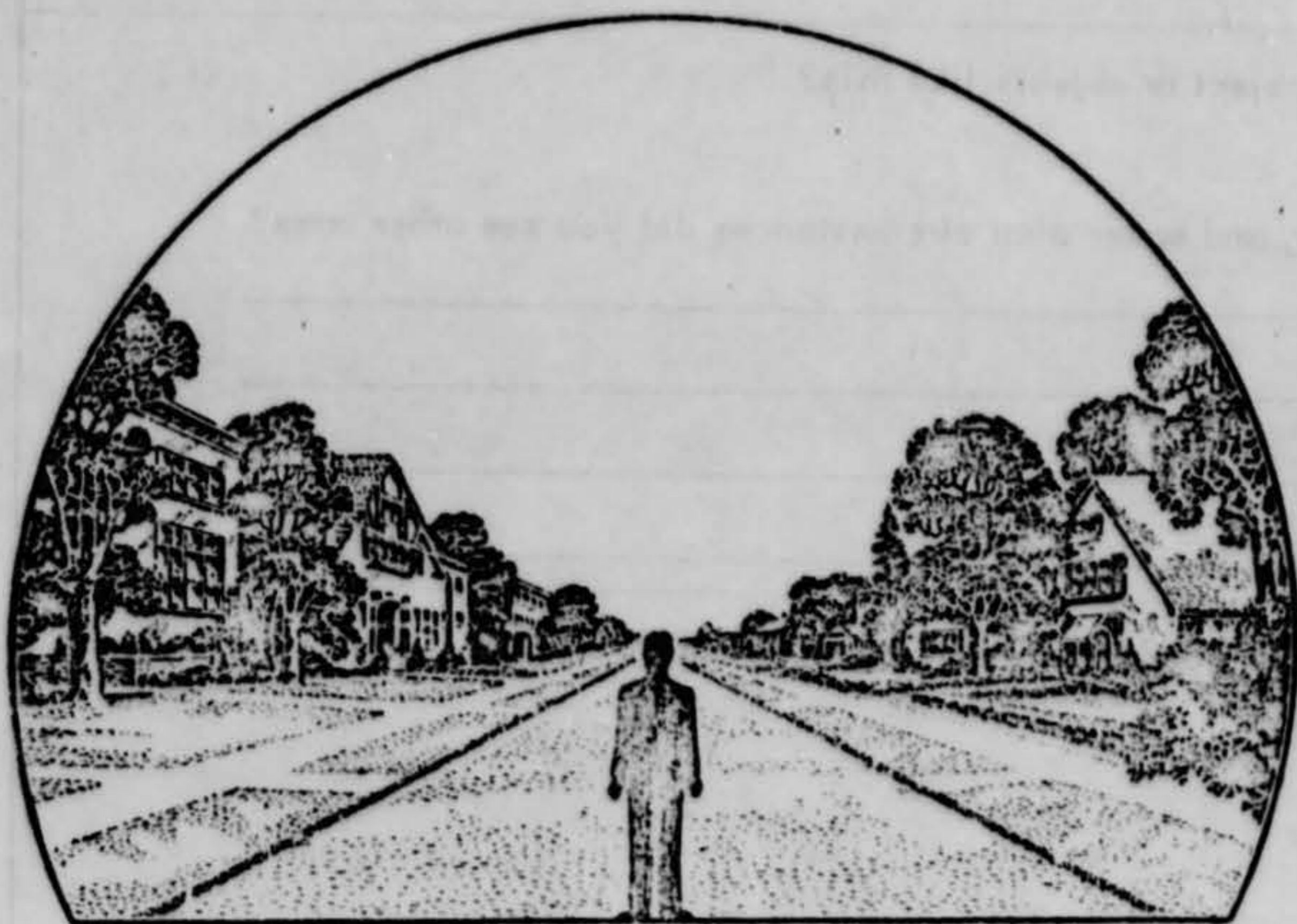
- a. From true North _____ degrees.
 b. From horizon _____ degrees.

32. 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.



10 o'clock

33. In the following larger sketch place an "A" at the position the object was when you *first* saw it, and a "B" at its position when you *last* saw it. Refer to smaller sketch as an example of how to complete the larger sketch.



34. What were the weather conditions at the time you saw the object?

34.1 CLOUDS (Circle One)

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds
- e. Don't remember

34.2 WIND (Circle One)

- a. No wind
- b. Slight breeze
- c. Strong wind
- d. Don't remember

34.3 WEATHER (Circle One)

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

34.4 TEMPERATURE (Circle One)

- a. Cold
- b. Cool
- c. Warm
- d. Hot
- e. Don't remember

35. When did you report to some official that you had seen the object?

18 Feb 57
 Day Month Year

36. Was anyone else with you at the time you saw the object?

(Circle One) Yes No

36.1 IF you answered YES, did they see the object too?

(Circle One) Yes No

36.2 Please list their names and addresses:

37. Was this the first time that you had seen an object or objects like this?

(Circle One) Yes No

37.1 IF you answered NO, then when, where, and under what circumstances did you see other ones?

38. In your opinion what do you think the object was and what might have caused it?

nothing

39. 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? _____ m.p.h.

40. 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? _____ feet.

41. Please give the following information about yourself:

(2 observers)

NAME _____
Last Name First Name Middle Name

ADDRESS _____
Street City Zone State
DAYTON 4 OHIO

TELEPHONE NUMBER _____

What is your present job? _____

Age 11 Sex MALE

Please indicate any special educational training that you have had.

- a. Grade school _____
- b. High school _____
- c. College _____
- d. Post graduate _____
- e. e. Technical school _____
(Type) _____
- f. Other special training _____

42. Date you completed this questionnaire: _____
Day Month Year