

PROJECT 10073 RECORD

1. DATE - TIME GROUP 3 January 66 04/0315Z	2. LOCATION Miamisburg, Trotwood, Oberlin, Ohio
3. SOURCE Civilian	10. CONCLUSION Astro (METEOR) ✓
4. NUMBER OF OBJECTS one	
5. LENGTH OF OBSERVATION A few seconds	11. BRIEF SUMMARY AND ANALYSIS Observers saw a blue-white light like a star only brighter and traveling very fast. One observer stated that before it went out it appeared to shoot sparks from it. The object had blue flame-like tail.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE Easterly	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	The meteor shower Quadrantids reaches its peak activity on 3 Jan.
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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:

Couldn't compare brighter than any common object

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?

Yes - just went out like a light

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: _____

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 None


b. Color blue - white - similar to a star

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?

Larger than match stick head

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.

 nearly round

Object was traveling from North to East

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? Faster than airplane

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? Very high

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

c. East

e. South

g. West

b. Northeast

d. Southeast

f. Southwest

h. Northwest

24.2 How fast were you moving? 20 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

b. Sun glasses Yes No

c. Windshield Yes No

d. Window glass Yes No

e. Binoculars Yes No

f. Telescope Yes No

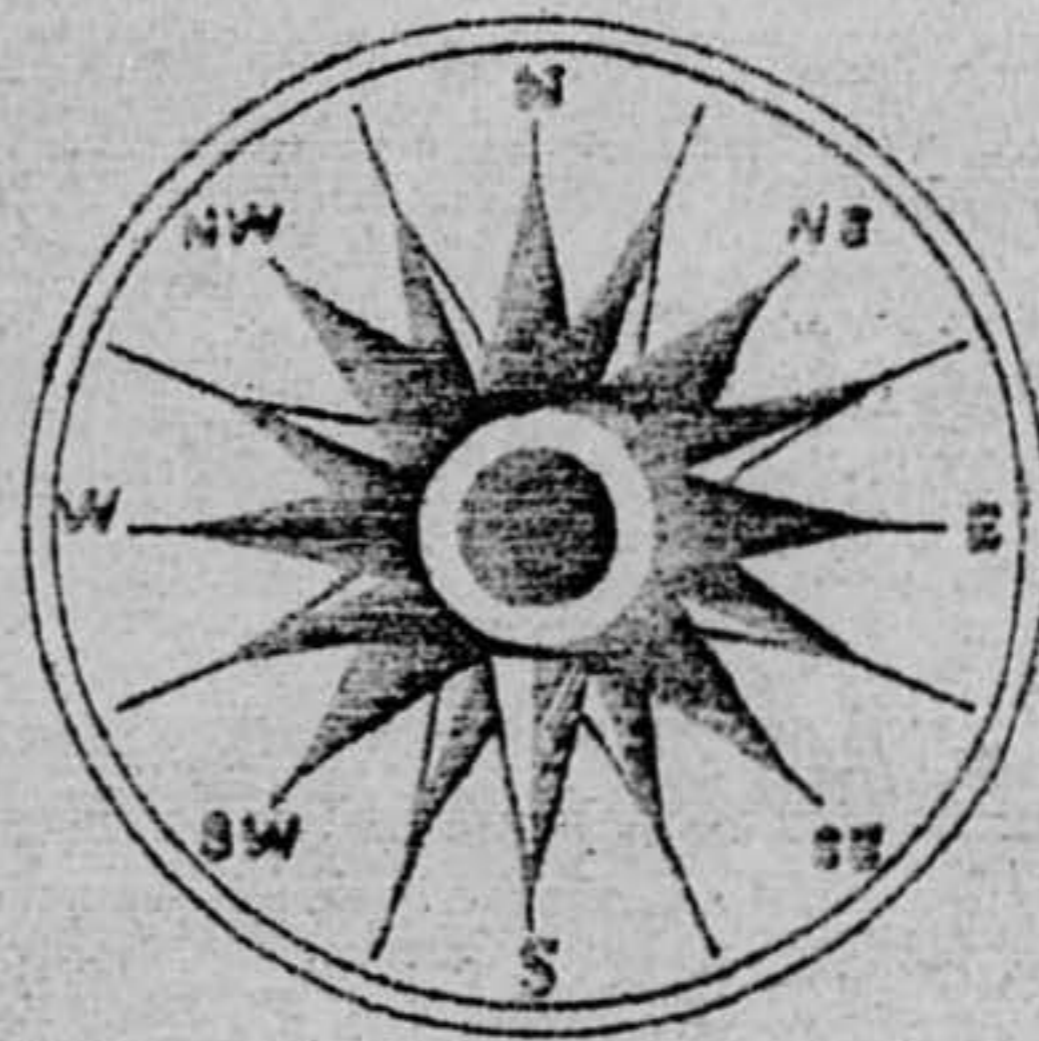
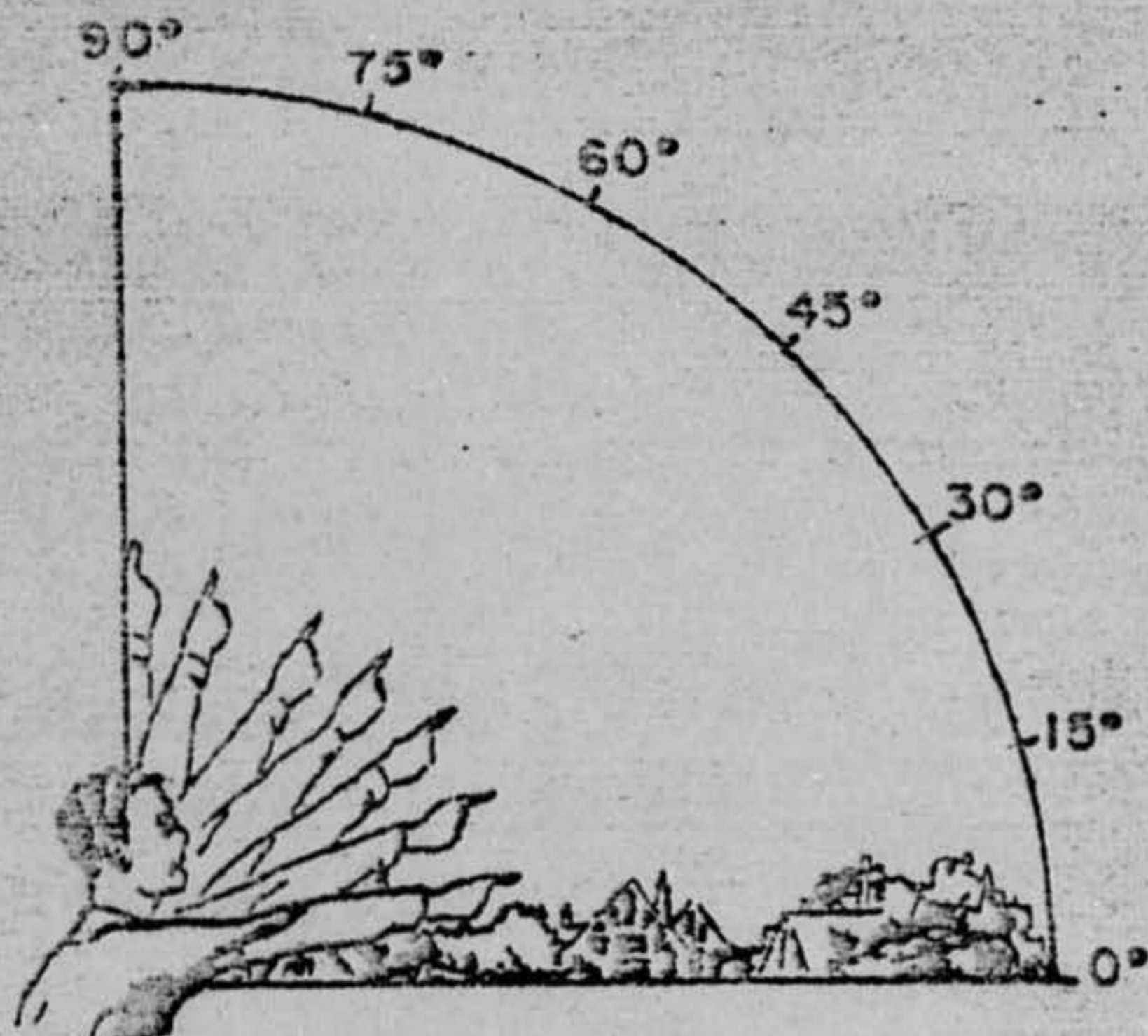
g. Theodolite Yes No

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.

Couldn't

27. 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. 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:

32. Please give the following information about yourself:

NAME	<u>[REDACTED]</u>	<u>[REDACTED]</u>	<u>[REDACTED]</u>
	Last Name	First Name	Middle Name
ADDRESS	<u>[REDACTED]</u>	<u>Trotwood</u>	<u>Ohio</u>
	Street	City	State
TELEPHONE NUMBER	<u>[REDACTED]</u>	AGE <u>Adult</u>	SEX <u>F</u>

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?

Day

Month

Year

BTAN

[REDACTED] Circle
Oberlin, Ohio

January 9, 1966

Officer in Charge of U.F.O. Reports
Wright Patterson Air Force Base, Ohio

Dear Sir:

I was coming home from a church meeting at approximately 10:20 P.M. on the night of January 8th. It was a very clear night. I was driving my car, traveling east on Walnut St. I came to the end of the street and was about to turn south on Pleasant St. There appeared in the sky directly over the F.A.C. Center a flying object. Although I am no judge of distance,

I assume this object was from
200 to 300 feet off the ground, as
I was not looking up into the sky
and this object was directly in
my view through my windshield.

It appeared just above the F.A.C.
Center and disappeared just beyond
the center. Now, I don't believe in
flying objects but I can only
report to you what I saw with
my own eyes.

This object was shaped like a
round disk with a long tail.
It was glowing, but had no haze.
It was a clearly definable object.
The "tail like" part which also
glowed, appeared to be a trail,
like ^a vapor trail or a jet.

trail. This object traveled in a definite pattern, as a plane and at about the speed of a regular plane.

Oberlin is a small town and not much happens after 10 o'clock at night and if no one else saw this object this would not be unusual.

When I arrived at home I called the F. A. O. Center and described what I had seen. They asked that I write to you and report what I had seen.

I would appreciate some reply to this letter.

Yours truly,

[Redacted signature]

351N

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?

3 Day JAN Month 66 Year

2. Time of day: 10:20
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?

2 miles west of Miamisburg Ohio
Nearest Postal Address City or Town State or County

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

about 30 sec or less
Hours Minutes Seconds

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

5.1 How was time in sight determined? estimation

5.2 Was object in sight continuously? Yes X No _____

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 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, 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:

Very much brighter than brightest star - very vivid

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 | <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 Faded away |
| f. Change shape? | Yes | <input checked="" type="radio"/> No | Don't know |
| g. Flash or flicker? | Yes | <input checked="" type="radio"/> No | Don't know |
| h. Disappear and reappear? | Yes | <input checked="" type="radio"/> No | Don't know |
- Light flash

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

Midnight blue faded out first - then white

Sound - a totally illuminated bright light - just before it disappeared
a number of blue & yellow things like sparks came from it

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: _____

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 nearby airplane drowned out any possible sound

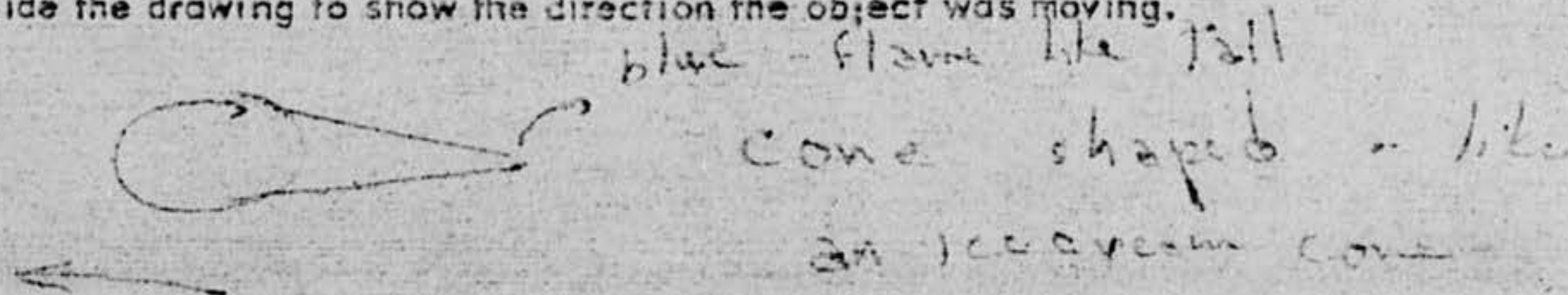
b. Color blue-white

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?

Larger than eraser end of pencil held at arms length
(after the fact estimation)

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

extremely fast

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? _____

22. Where were you located when you saw the object?

(Circle One):

a. Inside a building

b. *In a car - with window down*

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

c. East

e. South

g. West

b. Northeast

d. Southeast

f. Southwest

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

Initially sighted as turned in driveway

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

a. Eyeglasses Yes

No

e. Binoculars Yes

Yes

No

b. Sun glasses Yes

No

f. Telescope Yes

Yes

No

c. Windshield Yes

No

g. Theodolite Yes

Yes

No

d. Window glass Yes

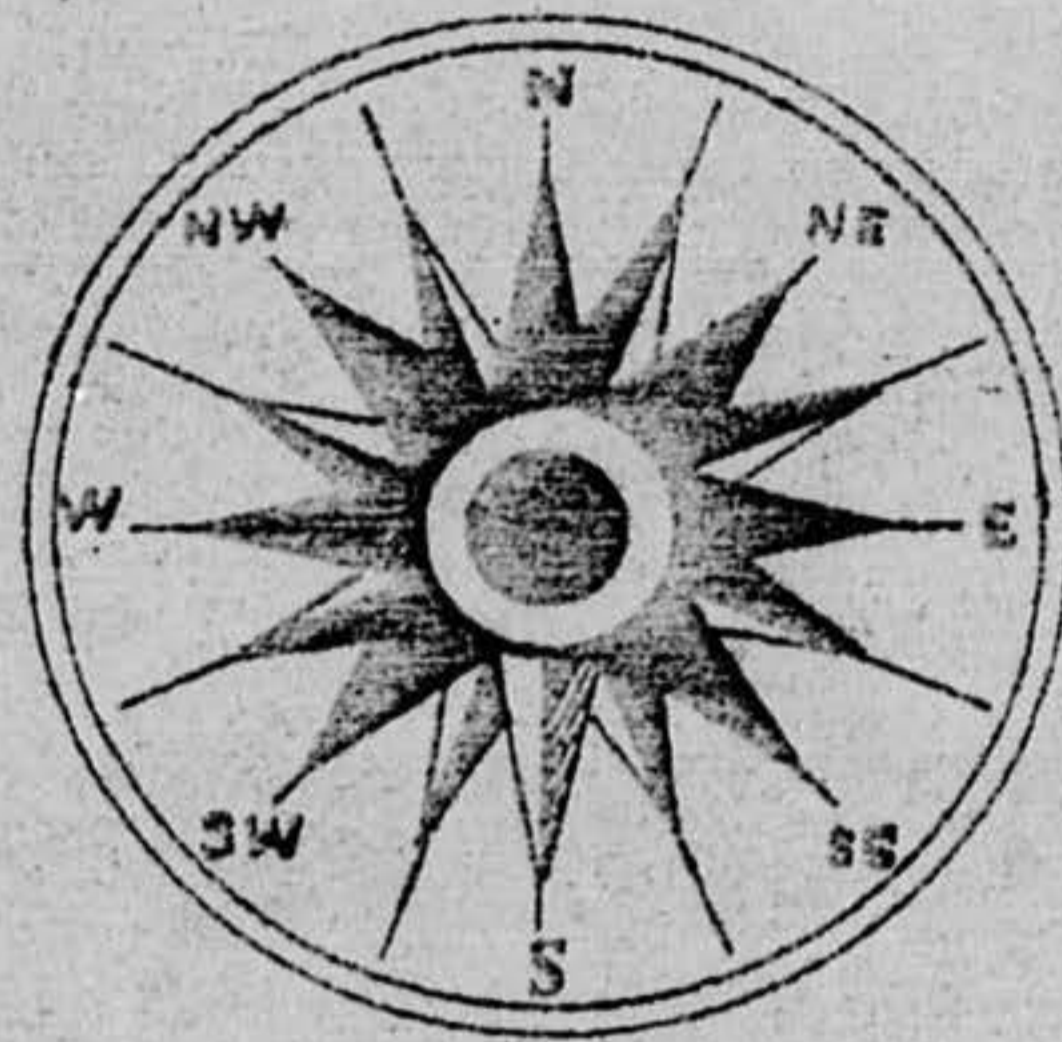
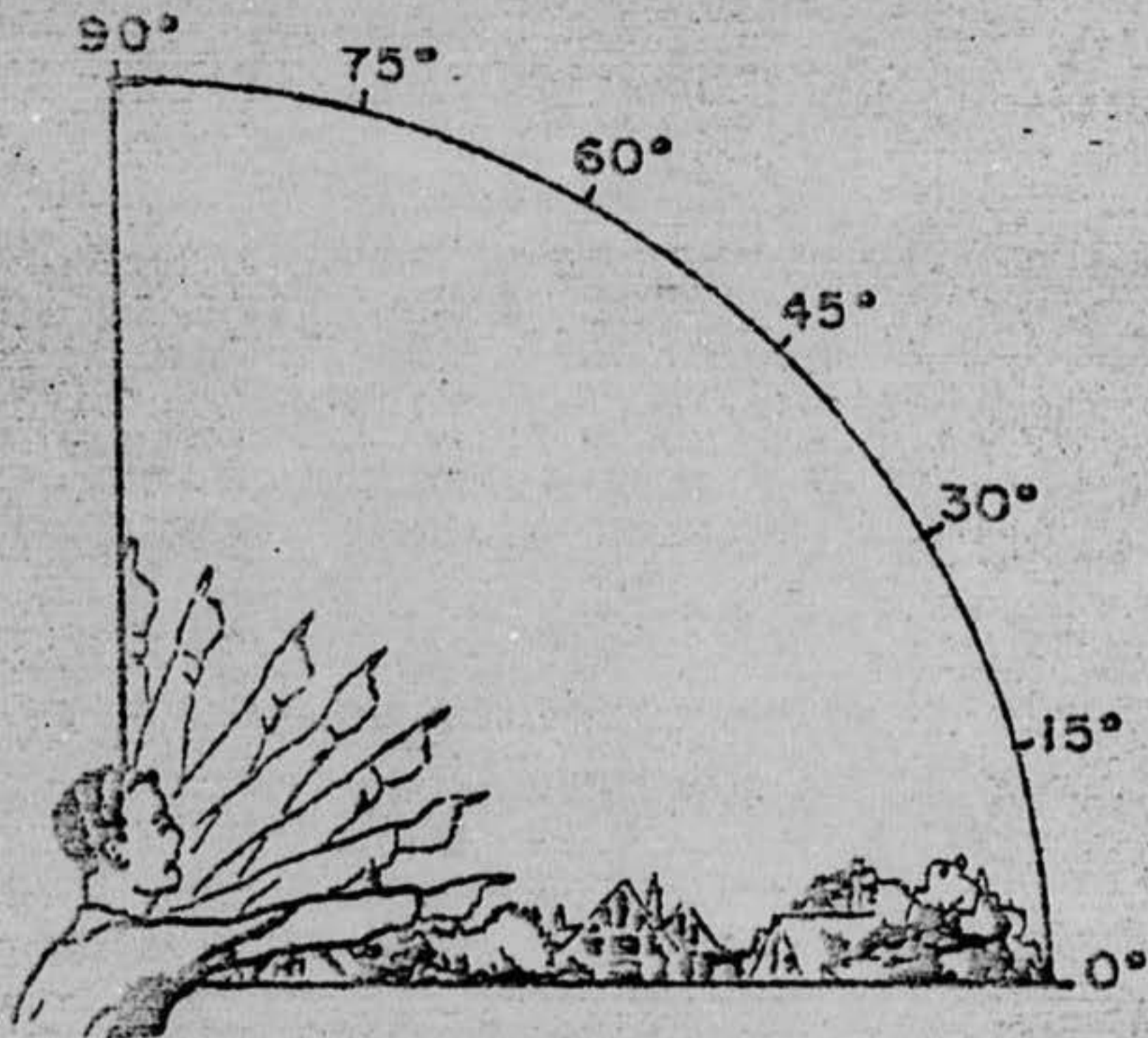
No

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.

Couldn't

27. 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. 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]

Age 17 (Son)

32. Please give the following information about yourself:

NAME

[REDACTED]

[REDACTED]

[REDACTED]

Last Name

First Name

Middle Name

ADDRESS

[REDACTED]

Upper Wiamisburg Rd

Street

City

Zone

State

TELEPHONE NUMBER

[REDACTED]

AGE

Adult

SEX

F

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?

Day

Month

Year

34. Date you completed this questionnaire:

Day

Month

Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

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.

<p>1. When did you see the object?</p> <p style="text-align: center;"> <u>3</u> <u>JAN</u> <u>66</u> <small>Day Month Year</small> </p>	<p>2. Time of day: <u>1000</u> <u>15</u> <small>Hour Minutes</small></p> <p>(Circle One): A.M. or <u>P.M.</u></p>
<p>3. Time Zone:</p> <p>(Circle One): a. <u>Eastern</u> b. Central c. Mountain d. Pacific e. Other _____</p> <p>(Circle One): a. Daylight Saving b. <u>Standard</u></p>	
<p>4. Where were you when you saw the object?</p> <p style="text-align: center;"> <u>Trotwood</u> <u>Ohio</u> <small>Nearest Postal Address City or Town State or County</small> </p>	
<p>5. How long was object in sight? (Total Duration) _____ <small>Hours Minutes Seconds</small></p> <p style="text-align: right; margin-right: 100px;"><u>Few Seconds</u></p> <p>a. Certain c. Not very sure b. Fairly certain d. Just a guess</p> <p>5.1 How was time in sight determined? <u>estimated</u></p> <p>5.2 Was object in sight continuously? Yes <input checked="" type="checkbox"/> No _____</p>	
<p>6. What was the condition of the sky?</p> <p style="text-align: center;"> DAY NIGHT a. Bright a. Bright b. Cloudy b. Cloudy </p>	
<p>7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?</p> <p>(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</p>	