

PROJECT 10073 RECORD

|  |   |
|--|---|
| 1. TIME GROUP<br>17 MAR 67 18/0815Z  | 2. LOCATION<br>LERRANON, OHIO   |
| 3. SOURCE<br>CIVILIAN  | 10. CONCLUSION<br>INSUFFICIENT DATA FOR EVALUATION<br><br>FTD Form 164 forwarded to witness; not returned after three days. |
| 4. NUMBER OF OBJECTS<br>270  |   |
| 5. LENGTH OF OBSERVATION<br>2 mins   |   |
| 6. TYPE OF OBSERVATION<br>ground visual  |   |
| 7. COURSE<br>East  |   |
| 8. PHOTOS<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No            | 11. BRIEF SUMMARY AND ANALYSIS<br><br>Information phoned into Duty Officer is sketchy. Need additional info. See case file. |
| 9. PHYSICAL EVIDENCE<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No |   |

MEMO FOR THE RECORD

9 Oct. 1967

Nicholas Meslonick (works somewhere on base) says he has additional information on both the 20th Sept. 67 Tipp City Case and the March 67 Lebanon (Ohio) sightings. However he would not reveal this info. to the case officer unless Gen. Gerrity and Gen. Goldsworthy were present. We were unable to meet these conditions

Lebanon, Ohio

0215218 Mar

17 MAR 67

*Copy Data*

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



REPLY TO  
ATTN OF: TDET/UFO

22 March 1967

SUBJECT: UFO Observation, 17 March 1967

TO: Mr. [REDACTED]  
Lebanon, Ohio 45345

Reference your unidentified observation. The information which we have received is not sufficient for a scientific evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided. Thank you for reporting your observation to the Air Force.

*J. C. Manatt*  
JAMES C. MANATT, Colonel, USAF  
Director of Technology and Subsystems

1 Atch  
FTD Form 164 w/envelope

TDET/UFO OFFICIAL FILE COPY



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:

*Brightness about like candle lamp with one bulb one dinner*

*2 object moving parallel one brighter*

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?           | <input checked="" type="radio"/> Yes | No | Don't know |
| b. Suddenly speed up and rush away at any time? | <input checked="" type="radio"/> Yes | No | Don't know |
| c. Break up into parts or explode?              | <input checked="" type="radio"/> Yes | No | Don't know |
| d. Give off smoke?                              | <input checked="" type="radio"/> Yes | No | Don't know |
| e. Change brightness?                           | <input checked="" type="radio"/> Yes | No | Don't know |
| f. Change shape?                                | <input checked="" type="radio"/> Yes | No | Don't know |
| g. Flash or flicker?                            | <input checked="" type="radio"/> Yes | No | Don't know |
| h. Disappear and reappear?                      | <input checked="" type="radio"/> Yes | No | Don't know |

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

*disappeared suddenly.*

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 no sound

b. Color ice blue

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?

*most of lower object covered  
higher object much smaller.*

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.

*Lower obj *  
*higher more just a spot of light*

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? upper  
10 miles from lower

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? 50 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

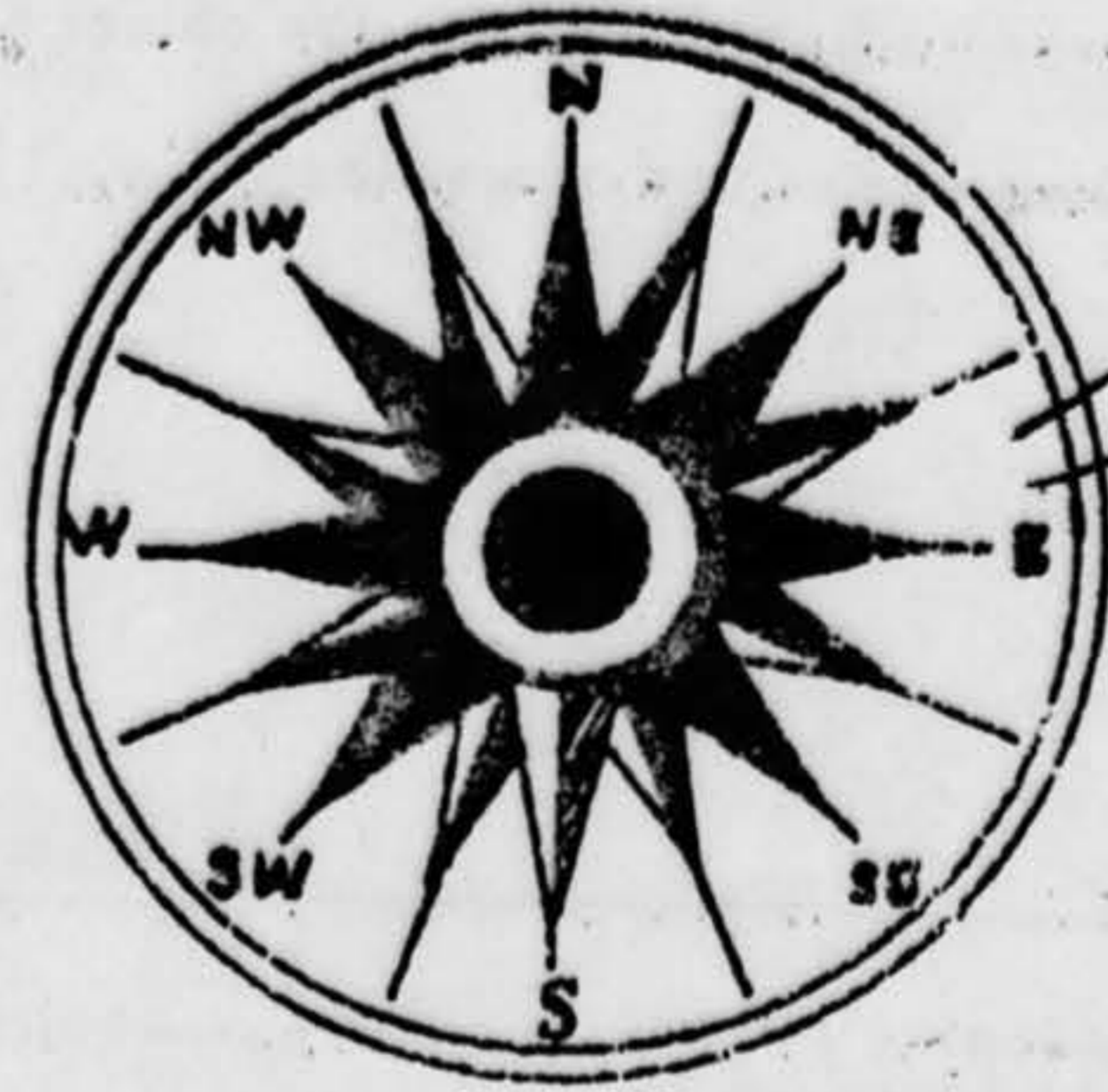
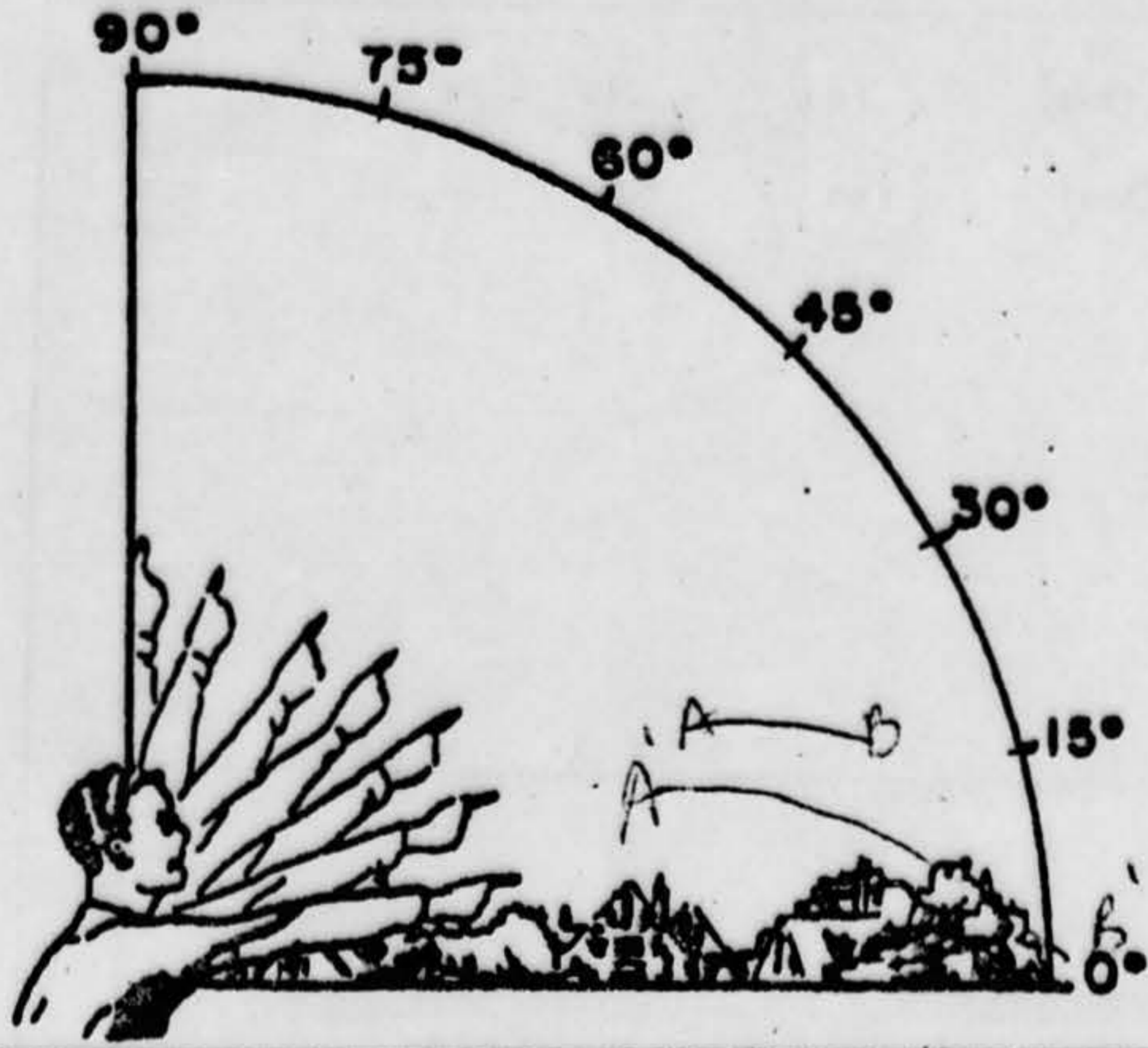
No

h. Other \_\_\_\_\_

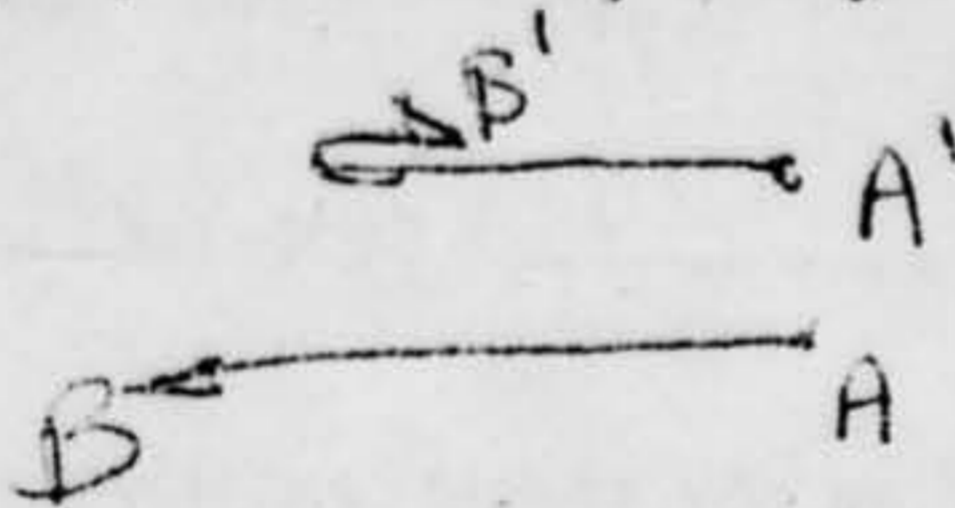
26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

upper one - distant star  
ellipse shaped light

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? 2

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:

WIFE,

32. Please give the following information about yourself:

NAME

~~██████████~~  
Last Name

~~██████████~~  
First Name

~~██████████~~  
Middle Name

ADDRESS

~~██████████~~  
Street

LEBANON  
City

45345  
Zone

OHIO  
State

TELEPHONE NUMBER

~~██████████~~

AGE

21

SEX

MAR E

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?

17  
Day

May  
Month

67  
Year

FTD DO

Sgt ERICH H. BAUER

34. Date you completed this questionnaire:

<sup>FTD DO</sup>  
17      Mar      1967  
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.

Call taken at 0927 EST