1. DATE TIME GROUP	2. LCCATION Georgebown, Somith Carolina			
8 January 65 09/0200Z				
3. SOURCE Civilien	10. CONCLUSION ALRORAFT			
4. NUMBER OF OBJECTS	Probable A/C. No unidentified tracks reported wit IIIIII Transort. This report relayed from NI USAF Command Post, therefore it is assumed that the objects were identified as known A/C.			
5. LENGTH OF OBSERVATION	11. BRIEF SUMMARY AND ANALYSIS			
Not Reported	Two bright objects about 2-3 miles above ground approaching			
6. TYPE OF OBSERVATION Ground-Visual 7. COURSE	From SE over ocean between Georgetown and Charleston S. C. Hade "O" turn and then went back out to Sea. No sound. Lights not very bright. Speed estimated as faster than jats. Chjects caused TV interference.			
Manuevered				
8. PHOTOS				
CI Yes XX No				
9. PHYSICAL EVIDENCE				
O Yes				

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

8 Jons.

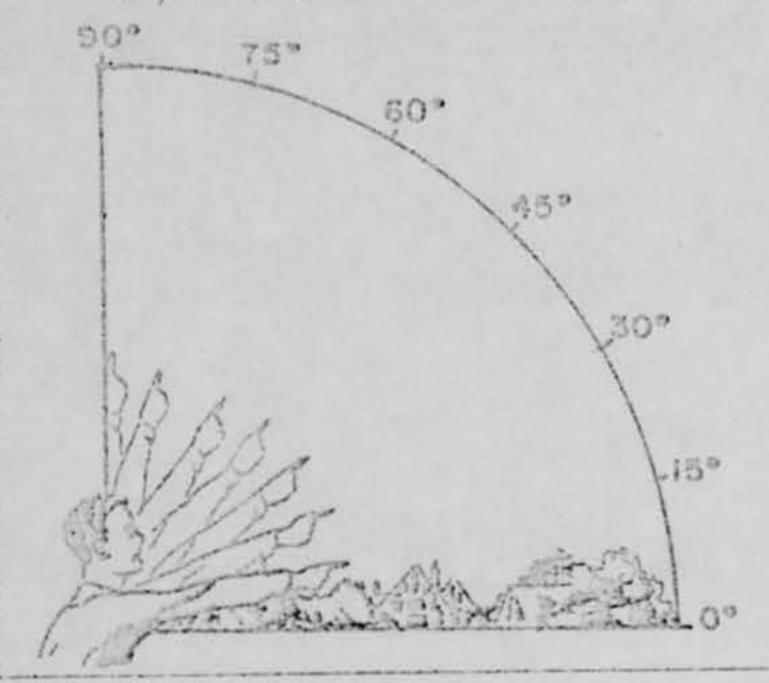
U.S. AIR FORCE TECHNICAL INFORMATION

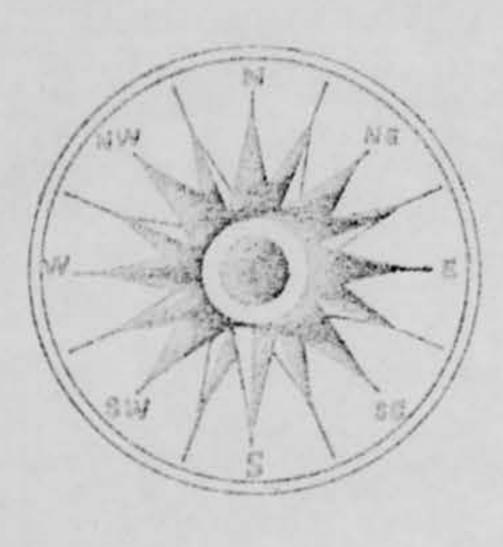
This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. 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.

(Circle One): A.M. or P.M. (Circle One): a. Daylight Saving b. Standard
ostown 5. C.
ostown 5. C.
or Town State or County
a Minutes Seconda
guess
No
IN located as you looked at the object?
or left and comember

	8.1 STARS (Circle One):	8.2 MOON	4 (Circle	One):		
	a. None	a. E	Bright mod	nlight		
	b. A few		Dull moon	10 Th (10)		
	c. Many	707 43		ght - pitch	lark	
	d. Don't remember	d. L	Don't rome	mber		
9.	What were the weather conditions at th	ne time you saw the	object?			
	CLOUDS (Circle One):	WEATHER	R(Circle C	ne):		
	e. Clear sky	a. Dry				
	b. Hazy	b. Fog, m	ist, or lie	ht roin		
	c. Scattered clouds	c. Modera	100			
	d. Thick or heavy clouds	d. Snow	To the Heavy	7		
		e. Don't r	amember			
0.	The object oppeared: (Circle One):					•
	a. Solid d. As	a light				
		t't remember				
	c. Vapar					
				Circle One):		
	a. Brighter b. Dimmer 11.1 Compare brightness to some com	d. Don't know				
	b. Dimmer	d. Don't know				
	11.1 Compare brightness to some com The edges of the object were:	d. Don't know	na ·			
	b. Dimmer 11.1 Compare brightness to some com	c. About the sam d. Don't know mon object:	na ·			
	The edges of the object were: (Circle One): a. Fuzzy or blurred b. Like a bright sta	c. About the sam d. Don't know mon object:	na ·			
	The edges of the object were: (Circle One): a. Fuzzy or blurred b. Like a bright sta	c. About the sam d. Don't know mon object:	na ·			
2,	The edges of the object were: (Circle One): a. Fuzzy or blurred b. Like a bright sta	c. About the sam d. Don't know mon object:	e. Othe			
2,	b. Dimmer 11.1 Compare brightness to some com The edges of the object were: (Circle One): a. Fuzzy or blurred b. Like a bright sta c. Sharply autlined d. Don't remember Did the object: a. Appear to stand still at any time	d. Don't know mon object:	e. Othe		och question) Don't know	
2.	b. Dimmer 11.1 Compare brightness to some com The edges of the object were: (Circle One): a. Fuzzy or blurred b. Like a bright sta c. Sharply outlined d. Don't remember Did the object: a. Appear to stand still at any time b. Suddenly speed up and rush away	d. Don't know mon object:	c. Other	e One for e	och question) Don't know Don't know	
2.	Did the object: a. Appear to stand still at any time b. Suddenly speed up and rush away c. Break up into parts or explode?	d. Don't know mon object:	e. Other	e One for e	Don't know Don't know Don't know	
2,	Did the object: a. Appear to stand still at any time b. Suddenly speed up and rush away c. Break up into parts or explade? d. Give off smake?	d. Don't know mon object:	Circ.	e One for e	Don't know Don't know Don't know Don't know Don't know	
2,	The edges of the object were: (Circle One): a. Fuzzy or blurred b. Like a bright sta c. Sharply outlined d. Dan't remember Did the object: a. Appear to stand still at any time b. Suddenly speed up and rush away c. Break up into parts or explode? d. Give off smake? e. Change brightness?	d. Don't know mon object:	e. Other	e One for e	Don't know	
2,	Did the object: a. Appear to stand still at any time b. Suddenly speed up and rush away c. Break up into parts or explade? d. Give off smake?	d. Don't know mon object:	Circ.	e One for e	Don't know Don't know Don't know Don't know Don't know	

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. Oraw a plature that will show the motion that the object or objects made. Place on "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.
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 Middle Name.
	ADDRESS City Zone State
	TELEPHONE NUMBER SEX 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?
	Duy Month Year
Linkin	

	proger /
34.	Date you completed this questionnaire: Day Month Year
35.	

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