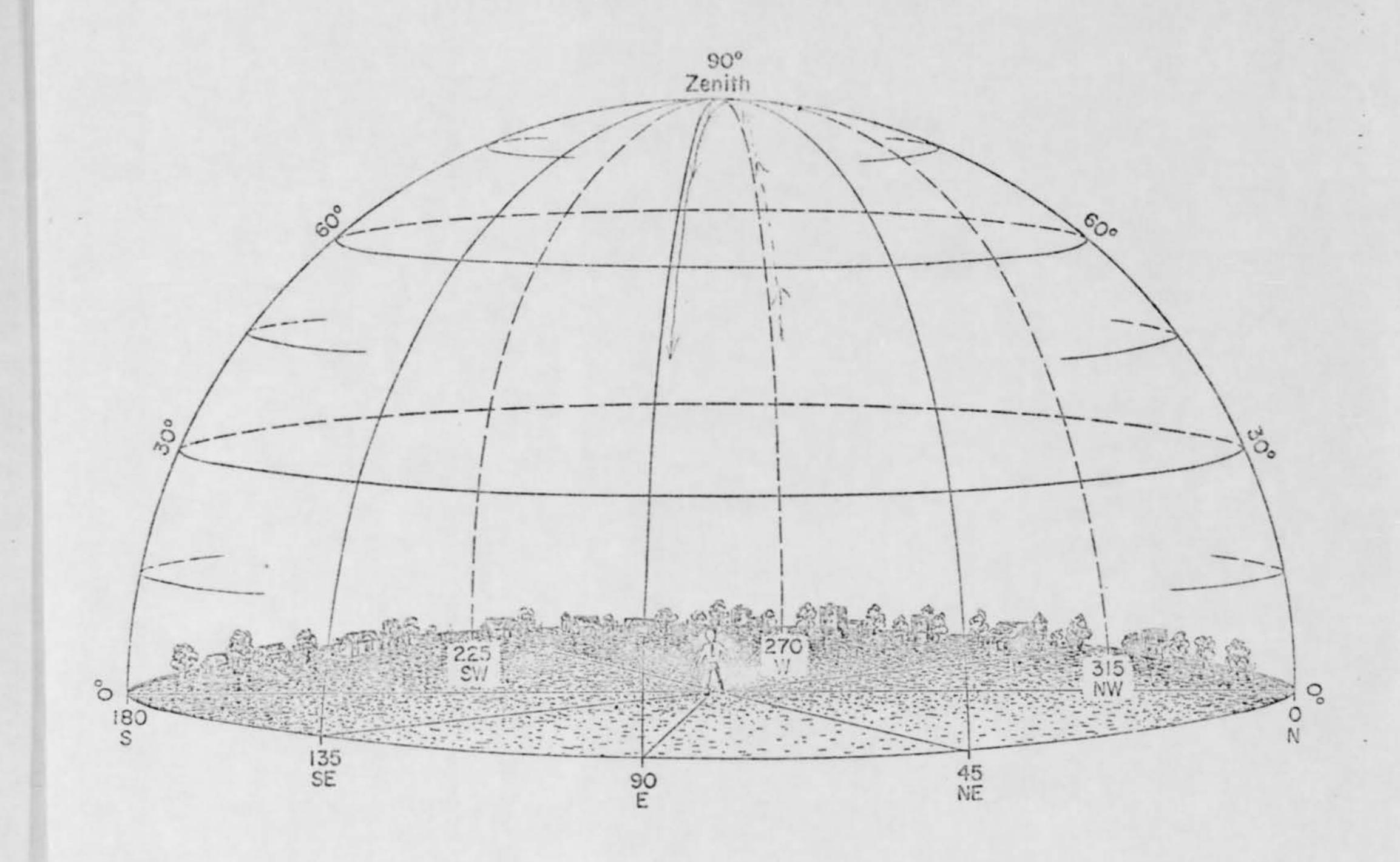
## PROJECT 10073 RECORD CARD

| 1. DATE 9 Jul 61 3. DATE-TIME GROUP Local 2155  | 2. LOCATION  OCCUMENT CASSY,  4. TYPE OF OBSERVATION  OCCUMENT CASSY  D. Air-Visual |   | 12. CONCLUSIONS  D Was Balloon D Probably Balloon D Possibly Balloon D Was Aircraft CF Probably Aircraft D Possibly Aircraft  |
|---|---|---|---|
| S. PHOTOS  D. Yes  DONNO  T. LENGTH OF CHSERVATION  | 6. SOURCE Military 8. NUMBER OF OBJECTS   | 9. COURSE   | D Was Astronomical D Probably Astronomical D Possibly Astronomical D Other D Insufficient Data for Evaluation D Unknown   |
| 9-10ses  10. BRIEF SUMMARY OF SIGHTING Both Light green. Round light. bomber. Size of pea at am suddenly 45° elev in W. D. 45° elev in E. | About size of large   | color of light<br>multicolored li<br>thereby appears<br>characteristic<br>is observed ils | light was observed moving the across a clear sky. is characteristic of ights blending together, ing as 1 light. This is of lights of a/c when it ying at high altitude. This afore evaluated as probable. |

ATIC FORM 329 (REV 26 BEP 52)

| 37. Do you think you can estimate the speed of the ob- (Circle One) Yes No  IF you answered YES, then what speed would you | Lanne .  |
|--|--|
|  |  |
| 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 y   | you say it was?feet.   |
| 11- you answered 1 Co, mon no.   |  |
| 41. Please give the following information about your   | :ilez  |
|  |  |
| NAMELast Name  | First Name Middle Name   |
|  | City Zone State  |
| ADDRESSStreet  | City Zone State  |
|  |  |
| TELEPHONE NUMBER   |  |
| 1/9  | ARMY LT. COL   |
| What is your present job?  |  |
| Age 4/1 Sex 1  |  |
| Age  |  |
| Please indicate any special educational training   | ng that you have had.  |
|  | e. e. Technical school   |
| a. Grade school  | (Type)   |
| b. High school   | f. Other special training  |
| a Callaga  | T. Omar special news   |
| c. College   | The state of the s |
| d. Post graduate   | FF LEAVEN WERTH  |
| d. Post graduate   | COM 4 STAPF COL<br>FF LEAVEN WERTH   |
|  | The state of the s |
| d. Post graduate   | COM 4 STAPP COL<br>FF LEAVEN WERTH   |
| d. Post graduate   | COM 4 STAPF COL<br>FF LEAVEN WERTH   |
| d. Post graduate   | COM 4 STAPF COL<br>FF LEAVEN WERTH   |
| d. Post graduate   | COM 4 STAPF COL<br>FF LEAVEN WERTH   |
| d. Post graduate   | COM 4 STAPE COLL FF LEAVENWERTH  10 TUCY 61  |
| d. Post graduate   | COM 4 STAPE COL<br>FF LEAVENWERTH  |
| d. Post graduate   | COM 4 STAPP COL<br>FF LEAVEN WERTH   |
| d. Post graduate   | COM 4 STAPE COLL FF LEAVENWERTH  10 TUCY 61  |
| d. Post graduate   | COM 4 STAPE COL<br>FF LEAVENWERTH  |



## HEADQUARTERS 1127TH USAF FIELD ACTIVITIES GROUP FORT BELVOIR, VIRGINIA

HEPLY TO

ATTN OF: AFCIN-1E-OC

11 JUL 1961

SUBJECT: Unidentified Flying Object

TO: PTD (TD-A3) Wright-Patterson AFB

Ohio

Attached UFO report forwarded for analysis per AFR 200-2.

FOR THE COMMANDER

ealupuil. GREGORY ALEXANDER

Captain, USAF Chief, Combat Operations

1 Atch

ATIC Form 164

## 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?  9 July 6/ Pay Month / Year  | 2. Time of day: 2/ 55  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?   | Ocean City N.J.  |
|    | Nearest Postal Address Additional remarks:  | City of Town State of Country  |
| 5. |   | Hours Minutes Seconds  e how certain you are of your answer to Question 5. |
|    | c. Certain  5. Fairly certain   | c. Not very sure<br>d. Just a guess  |
| 6. | What was the condition of the sky?  (Circle One): a. Bright Lylight b. Dull daylight e. Bright twilight | d. Just a trace of daylight e. No trace of daylight f. Don't remember      |
| 7. | IF you saw the object during DAYL "HT, T<br>the object?   | WILIGHT, or DAWN, where was the SUN located as you looked at               |
|    | (Circle One): a. In front of you<br>b. In back of you<br>c. To your right                               | d. To your left e. Overhead f. Don't remember                              |

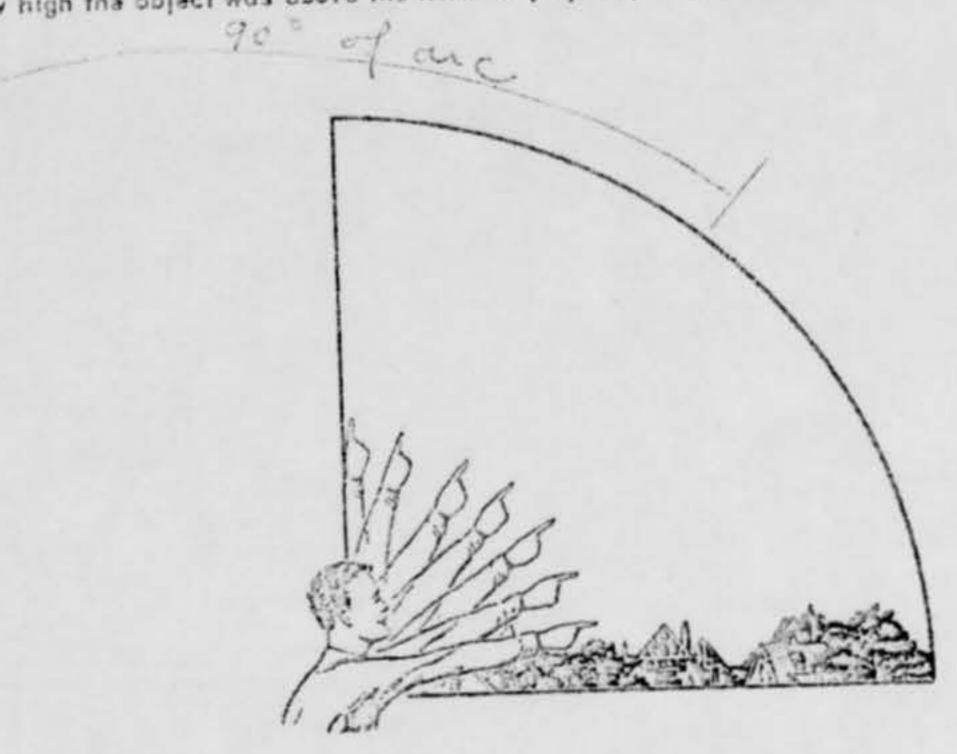
| on stans (Clark Cark                                       | 9 2 11001        | 4 (Circle One):     |   |
|--|------------------|---------------------|---|
| 8,1 STARS (Circle One):                                    |                  |                     |   |
| a. None  |                  | Bright moonlight    |   |
| b. A fave  |                  | Dull moonlight      |   |
| CE. Mony   | -                | No moonlight        | pitch dark  |
| d. Don't ramember  | (q,              | Don't remember      |   |
| 9. Was the object brighter than the background of the sky  | ?                |                     |   |
| (Circle One): (a) Yes b. h                                 | No               | c. Don't romam      | ber   |
| 0. IF it was BRIGHTER THAN the sky background, was         | the brightness   | like that of an aut | omobile headlight?:   |
| (Circle One) a. Am   | ile or more awa  | y (a distant car)?  |   |
|  |                  | 14? 3 Bier          |   |
|  | lock away?       |                     | 1   |
|  | eral yards away  | ,?                  |   |
|  | er               |                     |   |
| 1. Did the object: Cometant specil                         |                  | cle One for each o  | 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?                         | Yos              |                     | Don't Know  |
| d. Give off smoke?   | Yes              | (No                 | Don't Know  |
| e. Change brightness?                                      | Yos              | No.                 | Don't Know  |
| f. Change shape?<br>g. Flicker, throb, or pulsate?         | Yes              | No                  | Don't Know  |
|  |                  |                     |   |
| 2. Did the object move behind something at anytime, part   |                  |                     | VEC ALL LILL  |
| (Circle One): Yes (No) Don't K                             | cnow.            | ir you answered     | YES, then tell what   |
|  |                  |                     |   |
| 3. Did the object move in front of something at anytime, ; | porticularly a c | loud?               |   |
| (Circle One): Yes (No Don't N                              | Cnaw.            | IF you onswered     | YES, than tell what   |
| it moved in front of:                                      |                  |                     |   |
|  |                  |                     |   |
| d. Did the object appear: (Circle One): (a.) Solid         | ? b.             | Transparent?        | e. Don't Kno  |
| 5. Did you observe the object through any of the followin  |                  |                     |   |
| a. Eyeglesses Yes No                                       | e. Binoculars    |                     | No  |
| b. Sun glasses Yes No                                      | f. Tolescope     | Yos                 | No  |
| c. Windshield Yes No                                       | g. Theodolite    | Yes                 | Mo  |
| d. Window glass Yes No                                     |                  |                     | THE RESERVE AND ADDRESS OF THE PARTY OF THE |

| 16. Tell in a few words the following things about the object.  |   |  |  |
|---|---|--|--|
| a. Sound  | 20 CAC  |  |  |
|   | light peach + light green   |  |  |
| 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. |   |  |  |
| wife this   | by she saw wings & width of object,   |  |  |
|   |   |  |  |
|   |   |  |  |
| c. Sha  |   |  |  |
| 10 IE share was MODE THAN   | ONE object, then how many were there?   |  |  |
| Draw a picture of how the   | were arranged, and put an arrow to show the direction that they were traveling. |  |  |

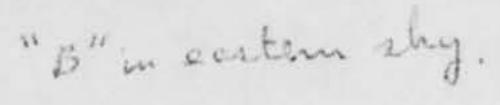
|                       | straight course                       | e, w to E outh.   |
|-----------------------|---------------------------------------|---|
|                       |                                       | 2 com   |
|                       |                                       |   |
|                       |                                       |   |
|                       |                                       |   |
|                       |                                       |   |
|                       |                                       | t tat at the same in the language dimension.  |
| . IF POSSIBLE, my     | to guess or estimate what the real    | size of the object was in its longest dimension.  |
|                       | foot. large 6-                        |   |
| . How large did the o | object or objects appear as compare   | ed 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  |
|                       | (5, Pea                               | h. Baseball   |
|                       | c. Dime                               | i. Grapefruit<br>i. Basketball  |
|                       | d. Nickal                             | k. Other  |
|                       | e. Quarter<br>f. Half dollar          | n. Viii i   |
|                       |                                       | in you are of your answer to Question 22.   |
| 22.1 (Circle One of t |                                       | c. Not very sure  |
|                       | a. Certain  (b) Fairly certain        | d. Uncertain  |
|                       |                                       |   |
| Manu did aba abiasi   | or objects disappear from view? .     | mened anddenly 450  |
| Land and the solution | the in w dinas                        | penied andding 43.  |
| . 440                 | tion in E.                            |   |
| B. B. R. A. C.        |                                       |   |
| 14. 41.               | of the two a motorial v               | what you naw, we would like for you to imagine that you cowould you make it? "How large would it be, and what shape |
| Coustine, the extent  | cribe in your own words a common obje | ect or objects which when placed up in the sky would give th  |
| would it have? Des    |                                       |   |
| would it have? Des    | 4.30 2                                | unta diglit.  |
| would it have? Des    | belo to som. I                        |   |
| would it have? Des    | ble to say. I                         |   |
| would it have? Des    | ble to say,                           |   |
| would it have? Des    | ble to ray.                           |   |
| would it have? Des    | ble to ray.                           |   |
| would it have? Des    | ble to ray.                           |   |
| would it have? Des    | ble to ray.                           |   |
| would it have? Des    | ble to say.                           |   |
| would it have? Des    | ble to ray.                           |   |
| would it have? Des    | ble to say.                           |   |
| would it have? Des    | ble to ray.                           |   |
| would it have? Des    | ble to say.                           |   |

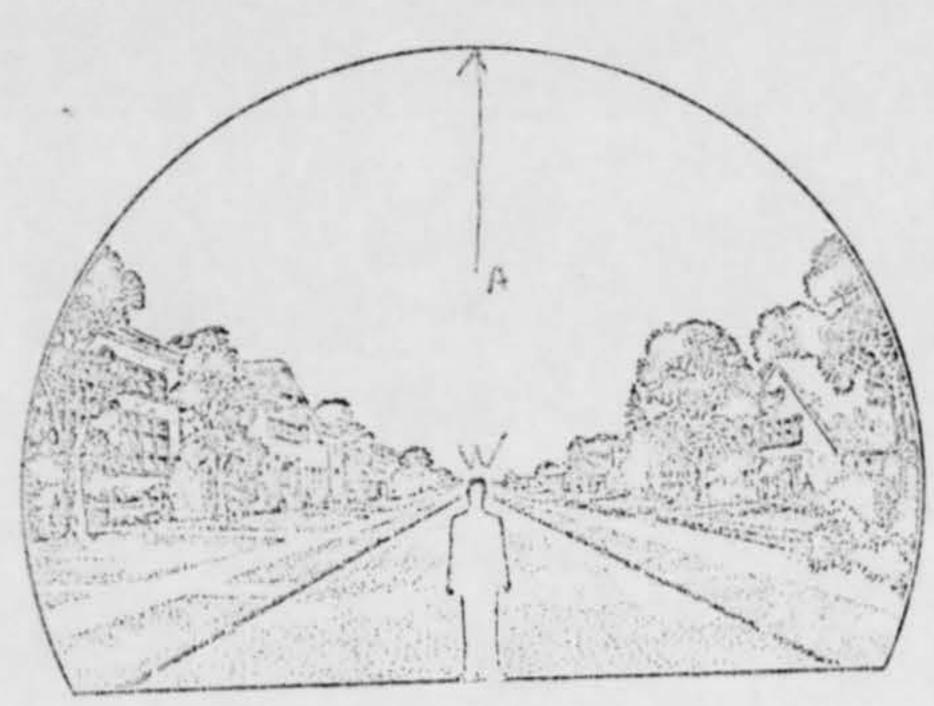
| on of a city? tion of a city? d? ntry?  |
|---|
| following questions:                    |
| West<br>Northwest                       |
| 110111111111111111111111111111111111111 |
|   |
|   |
| West<br>Northwest                       |
|   |
| West<br>Northwest                       |
| grees the object was                    |
|   |
|   |
|   |
|   |
|   |

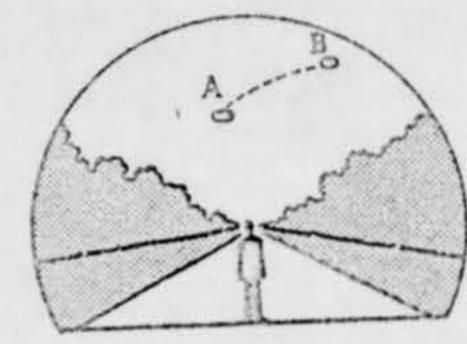
32. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you lost saw it.



33. In the following larger sketch place on "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)   | 34.2 WIND (Circle One)                           |
| (i) Clear sky  | a. No wind                                       |
| b. Hazy  | 6. Slight breeze                                 |
| c. Scattered clouds  | c. Strong wind                                   |
| d. Thick or heavy clouds   | d. Don't remember                                |
| e. Don't remember  |  |
| 34.3 WEATHER (Circle One)  | 34.4 TEMPERATURE (Circle One)                    |
| @ Dry  | a. Cold  |
| b. Fog, mist, or light rain  | b. Cool  |
| c. Moderate or heavy rain  | © Warm 7 5                                       |
| d. Snow  | d. Hot   |
| e. Don't remember  | e. Don't remember                                |
| 35. When did you report to some official that you had a 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                      | ct too?  |
| (Circle One) (Yes No   |  |
| 36.2 Please list their names and addresses:                            |  |
| mrs.   | o de .   |
|  | W  |
| Seem   | a deliero.                                       |
|  |  |
| 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 a                 | and what might have caused it?                   |
| 10   | on know The or men                               |
| a flying organi  | unknown type or origin.                          |
| · · · · · · · · · · · · · · · · · · ·                                  |  |
| Positive not A   | /C   |
|  |  |
|  |  |
|  |  |
|  |  |