	FEOT	ECT 10073 RECORD	
1. a THE CTOUP	2. LCCATION	New Carlisle, Chio	(1 Witness)
18 68 19/0315-0	Jan concinion		
DCOURCE	10. CONCLUSION		
Civilian	, INSUFFICIENT	DATA FOR EVALUATION	
4. NUMBER OF OBJECTS			
T-10	Witness did not	return AF Form 117 wi	thin 30 days.
S. LENGTH OF OBSERVATION	11. BRIEF SUMMARY		
20 Minutes.	Observer saw	In day alorention. In	ox 12 deg elevation and one
6. TYPE OF OBSERVATION	was a red li	sht. Sketchy data was	given to duty officer, and
Ground-Visual	fore, AF For	m 117 was sent to with	1035
7. COURSE			
Not Reported			
8. PHOTOS			
C Yes			
9. PHYSICAL EVIDENCE			
D Yes			

FORM A SON TOO

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



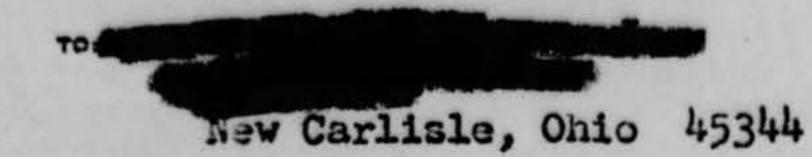
REPLY TO

TDPT/UFO

MAR 27 1968

SUBJECT:

UFO Observation, 18 March 1968



Reference your recent unidentified flying object sighting which you reported to the Air Force. The information which we have received is not sufficient for a scientific investigation. Request you complete the attached AF Form 117 and return it in the self-addressed envelope. Thank you for reporting your observation to the Air Force.

AMES C. MANATT, Colonel, USAF

1 Atch AF Form 117

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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? 1. When did you see the object? 1. Month Year	2. Time of day: 10 15 Hour Minutes 10 45 (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?	
NE	W CARLISIE OHIO CLERK
Necrest Postal Address	City or Town State or County
5. How long was object in sight? (Total Duration)	OO 20 00 Hours Seconds
a. Certain c. N	lot very sure
b. Fairly certain 5.1 How was time in sight determined?	ust a guess
5.2 Was object in sight continuously? Yes	_ No
6. What was the condition of the sky?	
DAY	SHT
a. Bright b. Cloudy a. Bright b. C	Stright Cloudy
7. IF you saw the object during DAYLIGHT, where was the	ne SUN located as you looked at the object?
b. In back of you e. O	o your left Overhead
c. To your right	Con't remember

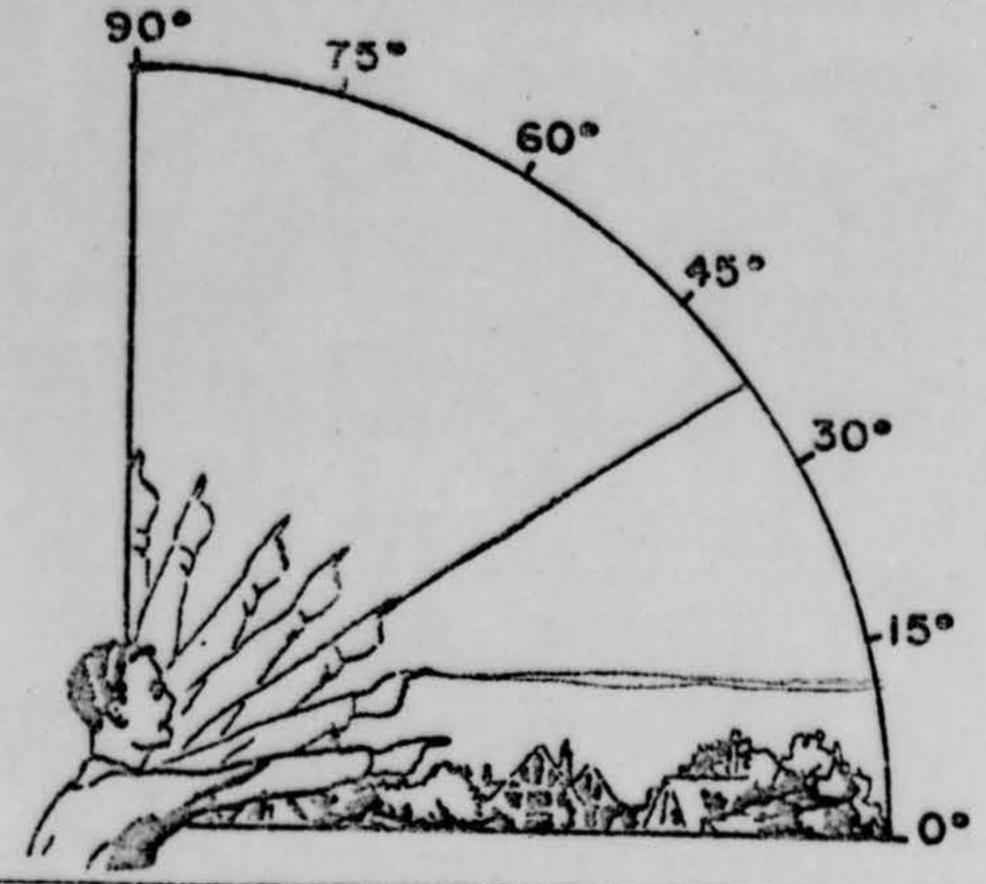
8.	8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?			
	8.1 STARS (Circle One): 8.2 MOON (Circle One):			
	a. None			
	b. A few Cb. Dull moonlight			
	c. No moonlight - pitch dark			
	d. Don't remember			
9.	9. What were the weather conditions at the time you saw the object?			
	CLOUDS (Circle One): WEATHER (Circle One):			
1	a. Clear sky			
-	b. Hazy b. Fog, mist, or light rain			
	c. Scattered clouds c. Moderate or heavy rain	i		
	d. Thick or heavy clouds d. Snow			
	e. Don't remember			
10.	10. The object appeared: (Circle One):			
0	d. As a light	1		
	b. Transparent e. Don't remember			
	c. Vapor			
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:				
12.	12. The edges of the object were:			
	(Circle One): a. Fuzzy or blurred . e. Other			
	b. Like a bright star			
	c. Sharply outlines			
	d. Don't remember			
13.	13. Did the object: (Circle One for each question)			
	a. Appear to stand still at any time? (Yes) No Don't know 3	TIMES		
	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? On't know			
	f. Change shape? Yes (No) Don't know			
	g. Flash or flicker? Don't know			
	h. Disappear and reappear? Yes (No) Don't know			

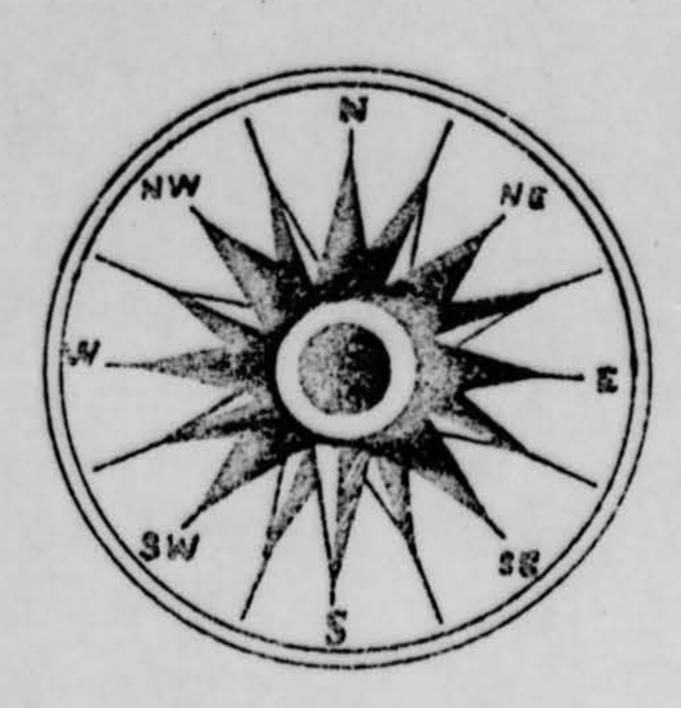
X

16. Did the object move in front of something at any time, porticularly 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 b. Color TOP- GOLD BOTTOM - RED Light. 18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note has		Page 3
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20.	Do you think you can estimate the speed of the obje	oct?
	(Circle One) Yes (No)	
	IF you answered YES, then what speed would you e	
	in you disserse ! Es, men what speed would you e	311mare:
21.	Do you think you can estimate how far away from yo	ou 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?	23. Were you (Circle One)
	(Circle One):	
	a. Inside a building	a. In the business section of a city?
<u> </u>	b. In a car	b. In the residential section of a city? c. In open countryside?
	c. Outdoors	d. Near an airfield?
	d. In an airplane (type)	e. Flying over a city?
	e. At sea	f. Flying over open country?
	f. Other	g. Other
24.	24.1 What direction were you moving? (Circle One) a. North b. Northeast 24.2 How fast were you moving? 24.3 Did you stop at any time while you were looking.	e. South f. Southwest h. Northwest miles per hour.
	(Circle One) Yes No	
25.	Did you observe the object through any of the follow	ing?
		e. Binoculars Yes (No)
		f. Telescope Yes (No)
		g. Theodolite Yes No
	d. Window glass Yes No	h. Other
26.		ible of what you saw, describe in your own words a common would give the same appearance as the object which you saw.

27. In the following sketch, imagine that you are at the point shown. Place ar "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? Two

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

1

		Page 6
30.	Have you over seen this, or a similar object before. If so give date or dates and location, YES - 16 MAR 68 0210 huz.	
31.	Was anyone else with you at the time you saw the object? (Circle One) 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 Lust Name First Nums Middle N	
	ADDRESS	ti 0
	TELEPHONE NUMBER AGE 2/ SEX 11	
	Indicate any additional information about yourself, including any special experience, which might	be partinent.
33.	When and to whom did you report that you had seen the object? IS man 65 Day Month Year Set Richard Est	R

34. Date you completed this questionnaire:	19	mor	68	
	Doy	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.