PROJECT 10073 RECORD

1. DATE - TIME GROUP	2. LOCATION
10 Oct 67 10/2300Z	Between Davemport and Demoine, Iowa 1
Civilden 4. NUMBER OF OBJECTS	10. CONCLUSION Astro (STAR, PLANET) Past Verses Following were at this location at 0400 EST: Venus (14°cie - 87°az) Regulus (16°cle - 87°az) Jupiter(16°cle - 88°az)
5. LENGTH OF OBSERVATION 2 hours 30 minutes 6. TYPE OF OBSERVATION Ground Visual 7. COURSE Varied 8. PHOTOS 11 Yes (X No.) 9. PHYSICAL EVIDENCE 17 Yes XX No.	Observer stated that the object appeared as a light which appeared to be solid. Object appeared brighter than a star. Compared to a spotlight. Color: white light.

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

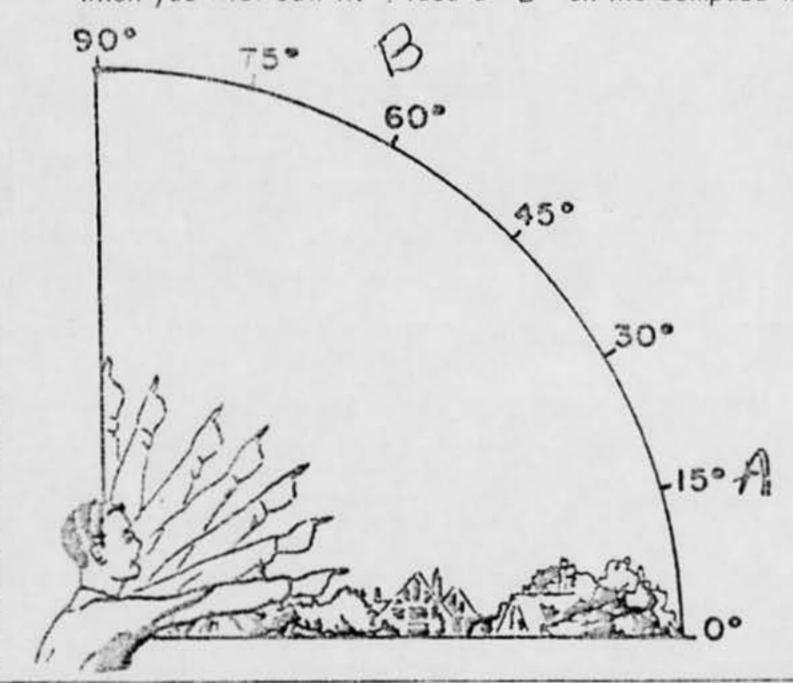
8.2 MOON (Circle One):
a. Bright moonlight b. Dull moonlight c. No moonlight — pitch dark d. Don't remember
ou saw the object?
WEATHER (Circle One):
6. Dry)
b. Fog, mist, or light rain
c. Moderate or heavy rain
d. Snow
e. Don't remember
mber
the brightest stars? (Circle One): bout the same on't know ect:
illimen metal
e. Other Bottom appeared flates

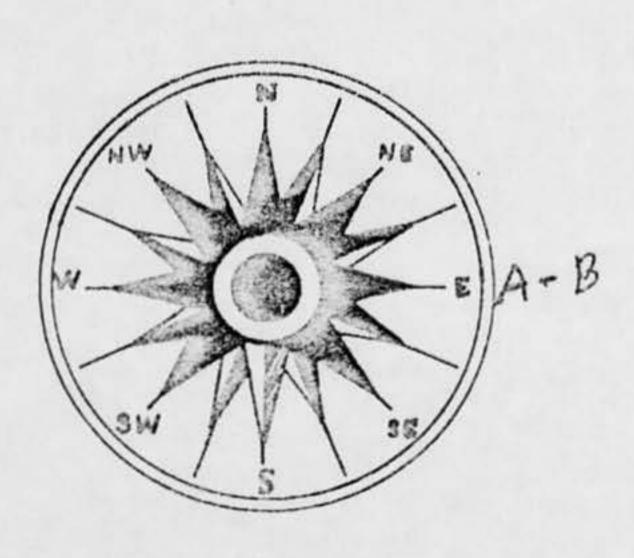
8. IF you saw the object at NIGHT, what did y	ou notice concerning the STARS and MOON?
8.1 STARS (Circle One):	8.2 MOON (Circle One):
d. Don't remember	a. Bright moonlight b. Dull moonlight c. No moonlight – pitch dark d. Don't remember
9. What were the weather conditions at the time	you saw the object?
CLOUDS (Circle One):	WEATHER (Circle One):
a. Clear sky b. Hazy	b. Fog, mist, or light rain
c. Scattered clouds d. Thick or heavy clouds	c. Moderate or heavy rain d. Snow e. Don't remember
10. The object appeared: (Circle One):	
a. Solid b. Transparent c. Vapor	
b. Dimmer d. 11.1 Compare brightness, to some common o	About the same Don't know
12. The edges of the object were: (Circle One): a. Fuzzy or blurred b. Like a bright star a. Sharply outlined d. Don't remember	e. Other Bottom appeared glales
a. Appear to stand still at any time? b. Suddenly speed up and rush away at a c. Break up into parts or explode? d. Give off smoke? e. Change brightness? f. Change shape? g. Flash or flicker? h. Disappear and reappear?	(Circle One for each question) Yes No Don't know

14. Did the object disappear while you were watching it? If so, how?	
Dt dil not desipped	
15. Did the object move behind something at any time, particularly a cloud	?
(Circle One): Yes (No) Don't Know. it moved behind:	IF you answered YES, then tell what
16. Did the object move in front of something at any time, particularly a cl	oud?
(Circle One): Yes (No) Don't Know. in front of:	IF you answered YES, then tell what
17. Tell in a few words the following things about the object: a. Sound Lhere was no sound b. Color Was like a Gright dillemina	tring light
18. We wish to know the angular size. Hold a match stick at arm's length much of the object is covered by the head of the match. If you had per sighting, how much of the object would have been covered by the match of the object would have been covered by the object	formed this experiment at the time of the
19. Draw a picture that will show the shape of the object or objects. Labor of the object that you saw such as wings, protrusions, etc., and espect Place an arrow beside the drawing to show the direction the object was	ially exhaust trails or vapor trails.

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 est	
21. Do you think you can estimate how far away from you (Circle One) Yes No IF you answered YES, then how far away would you s	
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 24. If you were MOVING IN AN AUTOMOBILE or other v 24.1 What direction were you moving? (Circle One) a. North b. Northeast d. Southeast 24.2 How fast were you moving? 24.3 Did you stop at any time while you were looking (Circle One) Yes No	e. South f. Southwest h. Northwest
b. Sun glasses c. Windshield d. Window glass Yes No d. Window glass Yes No h 26. In order that you can give as clear a picture as possi	Binoculars Yes No Telescope Yes No Theodolite Yes No Other Other ble 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 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.

WES

EAST

Itigh way

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 never
31. Was anyone also 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: Columbus, Ohio 237-36.51
NAME SITUATION about yourself: NAME SITUATION ADDRESS ADDRESS AGE 25 SEX FEMALE 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? Out 1967 Day Month Year

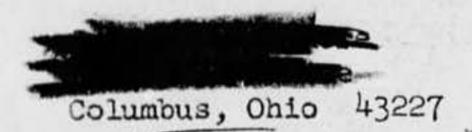
				Page 7	ALCOHOL:
34.	Date you completed this questionnaire:	Sat 14	Cet	_1967 Your	
35.	Information which you feel pertinent and which is questionnaire or a narrative explanation of your si	not adequately cov	ered in the spe	cific points of the	•2• 3
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	oky it appeake	ed Lo	Bane a	2) antenna	,
	in the wp.				
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			Train and the same		

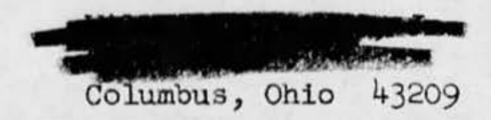
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astronomical 16 Oct 67
Between planengert and
plemoune, Dewa

TDET/UFO (Maj. Quintanilla/70916/jaf/11 Oct 67) 007 11 1957

UFO Observation of 10 Oct 1967





1. Thank you for reporting your sighting of 10 Oct 1967 to the Air Force. However, additional information is needed. If you would complete the inclosed FTD Form 164, it would be helpful in our analysis.

2. Thank you for your assistance in this matter.

MES C. MANATT, Colonel, USAF Mirector of Technology and Subsystems

1 Atch FTD Form 164

at 0400 EST

Ners at 14° elevation 87° az. Jupiter at 16° " 88° az. Regulus at 16° " 87° az. at stellar my - 4.3

-1.4

U.S. AIR FORCE TECHNICAL INFORMATION

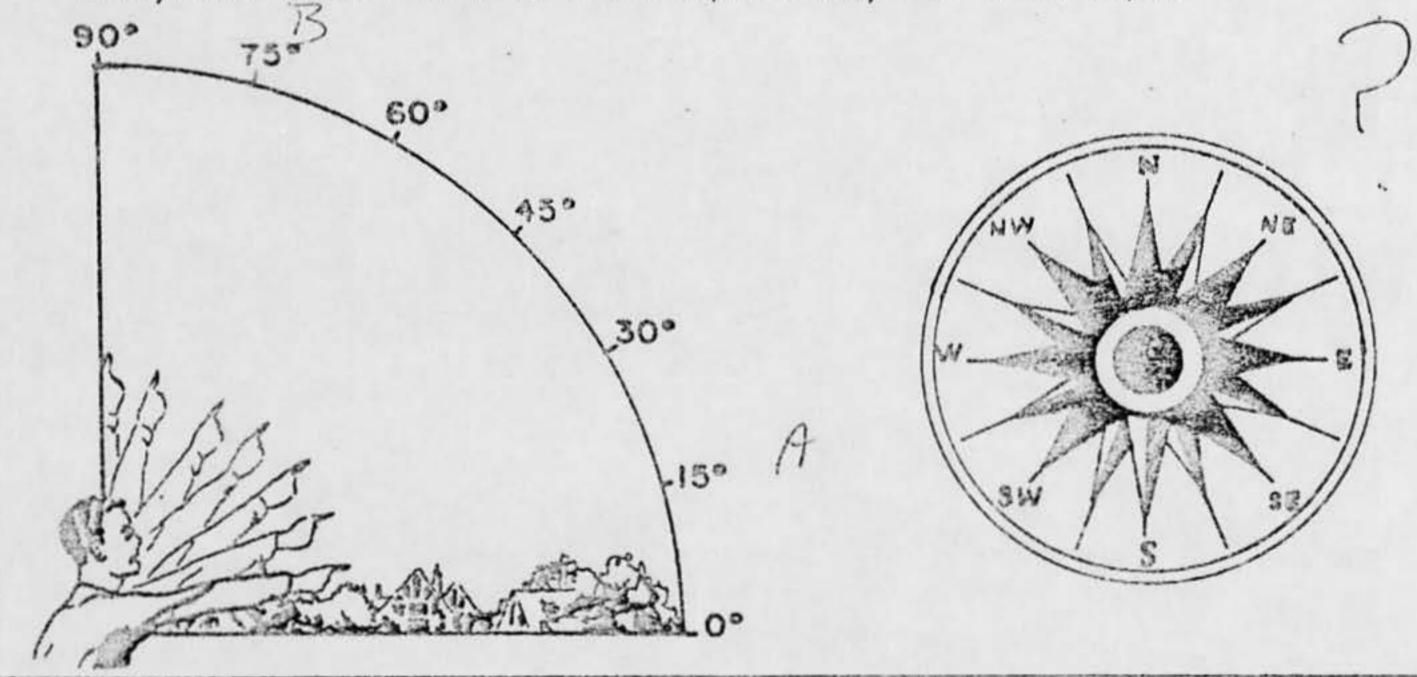
This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. 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? OCT Day Month Year	2. Time of day: OSOO-0730
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? / All Nearest Postal Address	CAR at 410 10WA City or Town State or County
5. How long was object in sight? (Total Duration)	2 30 — Hours Minutes Seconds
b. Fairly certain d.	Not very sure Just a guess n A TE No
a. Bright a.	GHT Bright Cloudy
b. In back of you e.	the SUN located as you looked at the object? To your left Overhead Don't remember Send (64)

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. Mone b. A few c. Many d. Don't remember	a. Bright moonlight b. Dull moonlight c. No moonlight – pitch dark d. Don't remember
9. What were the weather conditions at the time yo	ou saw the object?
CLOUDS (Circle One):	WEATHER (Circle One):
a. Clear sky	a. Dry
b. Hazy	b. Fog, mist, or light rain
c. Scattered clouds	c. Moderate or heavy rain
d. Thick or heavy clouds	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 remem	ber
	out the same on't know
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	
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

20.	Do you think you can estimate the speed of the object	t?	
	(Circle One) Yes (No		
	IF you answered YES, then what speed would you es	timate?	
21.	Do you think you can estimate how far away from you	the object was?	
	(Circle One) Yes No	+7	
	IF you answered YES, then how for away would you :	say it was? <u>VARRIED</u> - 100 to Enlocking	
22.	Where were you located when you saw the object?	23. Were you (Circle One)	
	(Circle One):	a. In the business section of a city?	
	a, Inside a building	b. In the residential section of a city?	
(b. In a car	c. In open countryside?	
	c. Outdoors	d. Near an airfield?	
	d. In an airplane (type)	e. Flying over a city?	
	e. At sec	f. Flying over open country?	
	f. Other	g. Other	
24.	1F you were MOVING IN AN AUTOMOBILE or other 24.1 What direction were you moving? (Circle One)	vehicle at the time, then complete the following questions:	
	a. North c. East	e. South g. West	
	b. Northeast d. Southeast	f. Southwest (h. Northwest)	
	24.2 How fast were you moving?		
	24.3 Did you stop at any time while you were looking	ng at the object?	
	(Circle One) Yes (No		
25.	Did you observe the object through any of the follow		
		e. Binoculars Yes (No	
	b. Sun glasses Yes (No	f. Telescope Yes No	
		g. Theodolite Yes (No	
	d. Window glass Yes (No)	n, Omer	
26		tible of what you saw, describe in your own words a common would give the same appearance as the object which you saw.	
1			

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.

VarriED

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) 31.1 IF you answered YES, did they see the object too? (Circle One) 31.2 Please list their names and addresses: (a) Um bus (a)
32.	Please give the following information about yourself: NAME ADDRESS Street Columbia City Cone Store TELEPHONE NUMBER AGE 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? 10 CT 1967 Day Month Year

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? Sunday Lept. 1967 2007 Month Year	2. Time of day: 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?	
	Dawa
Medrest Postal Address	City or Town State or County
5. How long was object in sight? (Total Duration)	2 30 Hours Minutes Seconds
(c. Certain)	. Not very sure
	. Just a guess
5.1 How was time in sight determined?	Wrist Watch
5.2 Was object in sight continuously? Yes.	No
6. What was the condition of the sky?	
	NICHT)
DAY a. Bright	NIGHT Bright
	. Cloudy
7. IF you saw the object during DAYLIGHT, where we	as the SUN located as you looked at the object?
(Circle One): a. In front of you	I. To your left
(b. In back of you)	. Overhead
c. To your right	f. Don't remember