

GREGORY ADAMS

SIGHTING OF UNIDENTIFIED PHENOMENA QUESTIONNAIRE

BUDGET BUREAU APPROVAL  
NUMBER 21-R258

THIS QUESTIONNAIRE HAS BEEN PREPARED SO THAT YOU CAN GIVE THE U.S. AIR FORCE AS MUCH INFORMATION AS POSSIBLE CONCERNING THE UNIDENTIFIED PHENOMENON THAT YOU HAVE OBSERVED. PLEASE TRY TO ANSWER ALL OF THE QUESTIONS. THE INFORMATION YOU GIVE WILL BE USED FOR RESEARCH PURPOSES. YOUR NAME WILL NOT BE USED IN CONNECTION WITH ANY OF YOUR STATEMENTS OR CONCLUSIONS WITHOUT YOUR PERMISSION. RETURN TO AIR FORCE BASE INVESTIGATOR FOR FORWARDING TO FTD (TDETR), WRIGHT-PATTERSON AFB, OHIO 45433, 1AW AFR 80-17. (IF ADDITIONAL SHEETS ARE NEEDED FOR NARRATIVE OR SKETCHES ATTACH SECURELY TO THIS FORM OR ANNOTATE WITH YOUR NAME FOR IDENTIFICATION.)

1. WHEN DID YOU SEE THE PHENOMENON?

DAY 24 MONTH OCT YEAR 68

2. WHAT TIME DID YOU FIRST SIGHT THE PHENOMENON?

HOUR 0300 MINUTES 3  A.M.  P.M.

3. WHAT TIME DID YOU LAST SIGHT THE PHENOMENON?

HOUR 0500 MINUTES 18  A.M.  P.M.

4. TIME / ZONE

DAYLIGHT SAVINGS

STANDARD

EASTERN

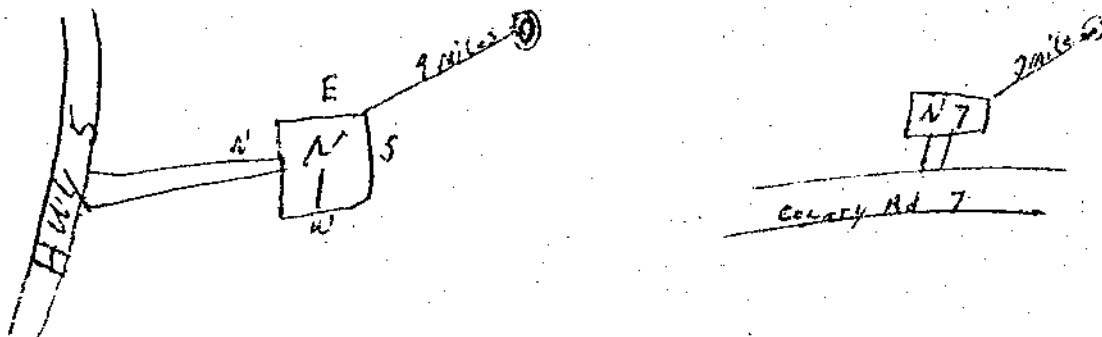
CENTRAL

MOUNTAIN

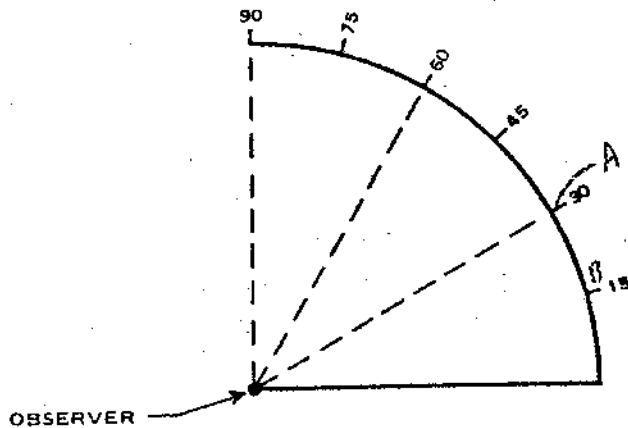
PACIFIC

OTHER

5. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? IF IN CITY, GIVE THE NEAREST STREET ADDRESS AND INDICATE ON A HAND DRAWN MAP WHERE YOU WERE STANDING WITH REFERENCE TO THE ADDRESS. IF IN THE COUNTRY, IDENTIFY THE HIGHWAY YOU WERE ON OR NEAR AND TRY TO FIX A DISTANCE AND DIRECTION FROM SOME RECOGNIZABLE LANDMARK.



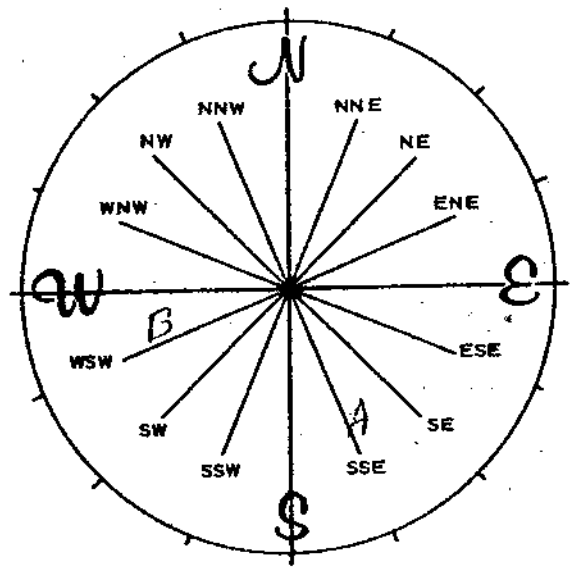
6. IMAGINE YOU ARE AT THE POINT SHOWN IN THE SKETCH. PLACE AN "A" ON THE CURVED LINE TO SHOW HOW HIGH THE PHENOMENON WAS ABOVE THE HORIZON, OR SKYLINE. WHEN FIRST SEEN. PLACE A "B" ON THE SAME CURVED LINE TO SHOW HOW HIGH ABOVE THE HORIZON THE PHENOMENON WAS WHEN LAST SEEN.



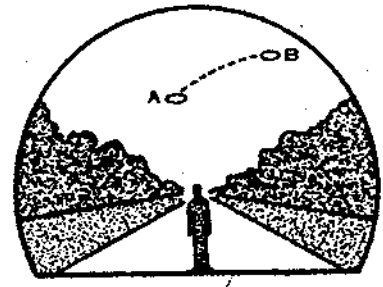
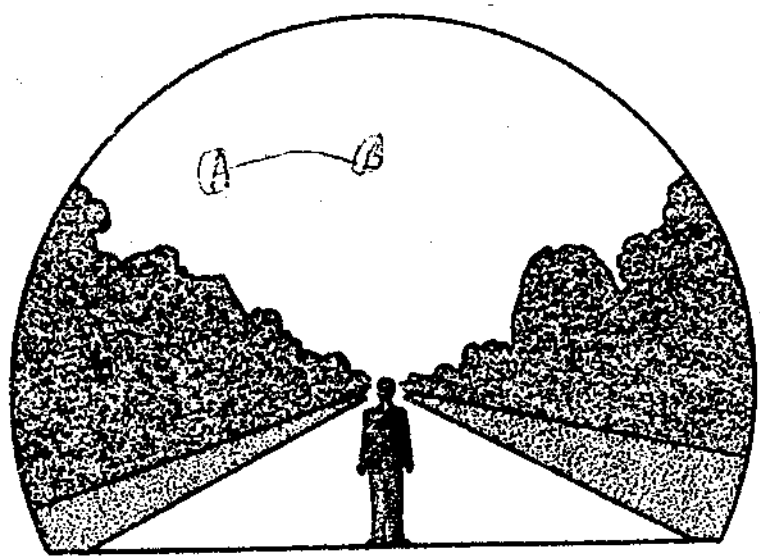
DECLASSIFIED  
Authority: WFO 9202  
By: EAJ DATE: 2008

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Authority: MMO-92322  
By: EM, MDA, DIB, Yack

6A. NOW IMAGINE YOU ARE AT THE CENTER OF THE COMPASS ROSE. PLACE AN "A" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN FIRST SEEN. PLACE A "B" ON THE COMPASS TO INDICATE THE DIRECTION TO THE PHENOMENON WHEN LAST SEEN.



7. IN THE SKETCH BELOW, PLACE AN "A" AT THE POSITION OF THE PHENOMENON WHEN FIRST SEEN, AND A "B" AT THE POSITION OF THE PHENOMENON WHEN LAST SEEN. CONNECT THE "A" AND "B" WITH A LINE TO APPROXIMATE THE MOVEMENT OF THE PHENOMENON BETWEEN "A" AND "B". THAT IS, SCHEMATICALLY SHOW WHETHER THE MOVEMENT APPEARED TO BE STRAIGHT, CURVED OR ZIG-ZAG. REFER TO SMALLER SKETCH AS AN EXAMPLE OF HOW TO COMPLETE THE LARGER SKETCH.



8. WHERE WERE YOU WHEN YOU SAW THE PHENOMENON? (Check appropriate blocks.)

<input checked="" type="checkbox"/> OUTDOORS		IN BUSINESS SECTION OF CITY
IN BUILDING		IN RESIDENTIAL SECTION OF CITY
IN CAR <input checked="" type="checkbox"/> AS DRIVER <input type="checkbox"/> AS PASSENGER		IN OPEN COUNTRYSIDE
IN BOAT		NEAR AIRFIELD
IN AIRPLANE <input type="checkbox"/> AS PILOT <input type="checkbox"/> AS PASSENGER		FLYING OVER CITY
OTHER		FLYING OVER OPEN COUNTRY
		OTHER

A. IF YOU WERE IN A VEHICLE, COMPLETE THE FOLLOWING:

WHAT DIRECTION WERE YOU MOVING?		HOW FAST WERE YOU MOVING?
<input checked="" type="checkbox"/> NORTH	<input type="checkbox"/> EAST	25 MPH
<input checked="" type="checkbox"/> SOUTH	<input type="checkbox"/> WEST	DID YOU STOP ANYTIME WHILE OBSERVING THE PHENOMENON?
<input type="checkbox"/> NORTHEAST	<input type="checkbox"/> SOUTHEAST	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> NORTHWEST	<input type="checkbox"/> SOUTHWEST	

EXPLAIN WHETHER SUCH MOVEMENT AFFECTS YOUR SKETCHES IN ITEMS 5 AND 6.

*NO*

DESCRIBE TYPE OF VEHICLE YOU WERE IN AND TYPE OF ROAD, TERRAIN OR BODY OF WATER YOU TRAVERSED DURING THE SIGHTING. STATE WHETHER WINDOWS OR CONVERTIBLE TOP WERE UP OR DOWN.

*4x4 Truck [redacted] Rd - windows down occasionally*

HOW MUCH OTHER TRAFFIC WAS THERE?

*NONE*

DID YOU NOTICE ANY AIRPLANES?  YES  NO. IF "YES," DESCRIBE WHEN THEY WERE IN SIGHT RELATIVE TO THE TIME OF SIGHTING THE PHENOMENON AND WHERE THEY WERE IN THE SKY RELATIVE TO THE POSITION OF THE PHENOMENON.

*B-52 bomber heard approximately 45 minutes AFTER seeing UFO. B-52 west and much higher than UFO.*

9. HOW LONG WAS THE PHENOMENON IN SIGHT?

LENGTH OF TIME	CERTAIN OF TIME	NOT VERY SURE
<i>Around 2 hours</i>	<input checked="" type="checkbox"/> FAIRLY CERTAIN	JUST A GUESS

HOW WAS TIME DETERMINED?

*AF Form 53 shows when dispatched - kept continued radio transmission*

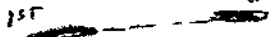
WAS THE PHENOMENON IN SIGHT CONTINUOUSLY?  YES  NO. IF "NO," INDICATE WHETHER THIS IS DUE TO YOUR MOVEMENT OR THE BEHAVIOR OF THE PHENOMENON, AND DESCRIBE SUCH MOVEMENT OR BEHAVIOR. INDICATE DISAPPEARANCES ON PREVIOUS SKETCHES.

*UFO movement had NO relationship with appearing + disappearing of UFO. UFO seemed to assume a stationary position AT FIRST the A hovering position, it would then speed up. The Reddish orange light kept changing white and occasionally Green.*

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 AUTHORITY: E.O. 13526  
 BY: JEM HADA DAD 2008

10. IF THERE WERE MORE THAN ONE PHENOMENON, HOW MANY WERE THERE? DRAW A PICTURE TO SHOW HOW THEY WERE ARRANGED. DID THIS ARRANGEMENT CHANGE DURING THE SIGHTING?

When enroute to M-7 Another object appeared (same as first one)  
 They seemed to get pretty close at one time  
 And all of a sudden one disappeared.



11. CONDITIONS (Check appropriate blocks.)

A. SKY		B. WEATHER	
<input type="checkbox"/> DAY		<input type="checkbox"/> CUMULUS CLOUDS (Low fluffy)	<input type="checkbox"/> FOG OR MIST
<input type="checkbox"/> TWILIGHT		<input type="checkbox"/> CIRRUS CLOUDS (High fleecy or Herring-bone)	<input type="checkbox"/> HEAVY RAIN
<input checked="" type="checkbox"/> NIGHT		<input type="checkbox"/> NIMBUS CLOUDS (Rain)	<input type="checkbox"/> LIGHT RAIN OR DRIZZLE
<input checked="" type="checkbox"/> CLEAR		<input type="checkbox"/> CUMULONIMBUS CLOUDS (Thunderstorms)	<input type="checkbox"/> HAIL
<input type="checkbox"/> PARTLY CLOUDY		<input type="checkbox"/> HAZE OR SMOG	<input type="checkbox"/> SNOW OR SLEET
<input type="checkbox"/> COMPLETELY OVERCAST			<input checked="" type="checkbox"/> UNKNOWN
			<input type="checkbox"/> NONE OF THE ABOVE

C. IF THE SIGHTING WAS AT TWILIGHT OR NIGHT, WHAT DID YOU NOTICE ABOUT THE STARS AND MOON?

(1) STARS		(2) MOON	
<input type="checkbox"/> NONE		<input type="checkbox"/> BRIGHT MOONLIGHT	<input checked="" type="checkbox"/> NO MOONLIGHT
<input checked="" type="checkbox"/> A FEW		<input type="checkbox"/> MOON WITH HALO	<input type="checkbox"/> UNKNOWN
<input type="checkbox"/> MANY		<input type="checkbox"/> MOON HIDDEN BY CLOUDS	
<input type="checkbox"/> UNKNOWN		<input type="checkbox"/> PARTIAL (New or quarter)	

D. IF SIGHTING WAS IN DAYLIGHT, WAS THE SUN VISIBLE?  YES  NO. IF "YES," WHERE WAS THE SUN AS YOU FACED THE PHENOMENON?

<input type="checkbox"/> IN FRONT OF YOU	<input type="checkbox"/> TO YOUR RIGHT	<input type="checkbox"/> OVERHEAD (Near noon)
<input type="checkbox"/> IN BACK OF YOU	<input type="checkbox"/> TO YOUR LEFT	<input type="checkbox"/> UNKNOWN

E. SPECIFY THE MAJOR SOURCE OF ILLUMINATION PRESENT DURING THE SIGHTING, SUCH AS THE SUN, HEADLIGHTS OR STREET LAMP, ETC. FOR TERRESTRIAL ILLUMINATION, SPECIFY DISTANCE TO LIGHT SOURCE.

Head Lights, Lights at Area Facility.

12. GIVE A BRIEF DESCRIPTION OF THE PHENOMENON, INDICATING WHETHER IT APPEARED DARK OR LIGHT, WHETHER IT REFLECTED LIGHT OR WAS SELF-LUMINOUS AND WHAT COLORS YOU NOTICED. DESCRIBE YOUR IMPRESSION OF WHETHER IT WAS SOLID OR TRANSPARENT, WHETHER EDGES WERE SHARP OR FUZZY. DESCRIBE THE SHAPE OR INDICATE IF IT APPEARED AS A POINT OF LIGHT. INDICATE COMPARISONS WITH OTHER OBSERVED OBJECTS, LIKE STARS, A LIGHT OR OTHER OBJECT IN YOUR FIELD OF VIEW.

The Lights were Redish orange - changing to white  
and green. Lights were self-luminous and very  
 bright, size + shape hard to distinguish.  
 see characteristic colors of Sirius

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 Authority: AND-983221  
 BY: EAM, HWS, DAB, TCB

13.	DID THE PHENOMENON	YES	NO	UNKNOWN
	MOVE IN A STRAIGHT LINE?	✓		
	STAND STILL AT ANYTIME?	✓		
	SUDDENLY SPEED UP AND RUN AWAY?	✓		
	BREAK UP IN PARTS AND EXPLODE?	✓	✓	
	CHANGE COLOR?		✓	
	GIVE OFF SMOKE?	✓	✓	
	CHANGE BRIGHTNESS?		✓	
	CHANGE SHAPE?	✓	✓	
	FLASH OR FLICKER?	✓	✓	
	DISAPPEAR AND REAPPEAR?			✓
	SPIN LIKE A TOP?			✓
	MAKE A NOISE?			✓
	FLUTTER OR WOBBLE?			✓

14. WHAT DREW YOUR ATTENTION TO THE PHENOMENON?

A MAINTANCE TEAM WORKING AT November 7  
CALLED over RADIO.

A. HOW DID IT FINALLY DISAPPEAR?

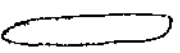
THE LAST I SAW OF IT. IT APPEARED TO BE  
HOVERING OVER THE GROUND APPROXIMATELY 1000 FT ABOVE GROUND.  
YOU COULD SEE A GREEN LIGHT FOR ABOUT 15 MINUTES  
THE LIGHT SEEM TO BE GETTING SMALLER UNTILL YOU COULDN'T SEE IT.

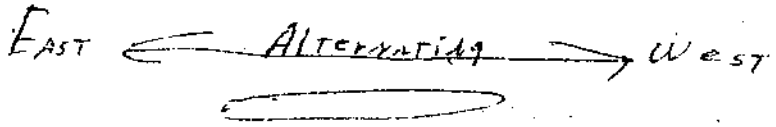
B. DID THE PHENOMENON MOVE BEHIND OR IN FRONT OF SOMETHING, LIKE A CLOUD, TREE, OR BUILDING AT ANY TIME?  
 YES  NO. IF "YES," DESCRIBE.

RIGHT BEFORE THE B-52 WAS SEEN. THE UFO  
DECEASED GRADUALLY BEHIND WHAT COULD HAVE BEEN TREES  
HAD TO SAY ABOUT TREES IT WAS SO DARK.

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DATE: 11-11-2001

15. DRAW A PICTURE THAT WILL SHOW THE SHAPE OF THE PHENOMENON. INCLUDE AND LABEL ANY DETAILS THAT MIGHT HAVE APPEARED AS WINGS OR PROTRUSIONS, AND INDICATE EXHAUST OR VAPOR TRAILS. INDICATE BY AN ARROW THE DIRECTION THE PHENOMENON WAS MOVING.

I Never could distinguish the shape because of the  
Bright Light. How ever it seemed to be shaped as  
A weiner . This is the best description  
I can give, but I am not completely sure of the shape.



16. WHAT WAS THE ANGULAR SIZE? HOLD A MATCH AT ARM'S LENGTH IN FRONT OF A KNOWN OBJECT, SUCH AS A STREET LAMP OR THE MOON. NOTE HOW MUCH OF THE OBJECT IS COVERED BY THE HEAD OF THE MATCH. NOW IF YOU HAD BEEN ABLE TO PERFORM THIS EXPERIMENT AT THE TIME OF THE SIGHTING, ESTIMATE WHAT FRACTION OF THE PHENOMENON WOULD HAVE BEEN COVERED BY THE MATCH HEAD.

ESTIMATING  $\frac{1}{3}$  would be covered by MATCH HEAD.

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AUTHORITY: NND 930221  
BY: ECM, HAW, DAB, KAH

17. DID YOU OBSERVE THE PHENOMENON THROUGH ANY OF THE FOLLOWING? INCLUDE INFORMATION ON MODEL, TYPE, FILTER, LENS PRESCRIPTION OR OTHER APPLICABLE DATA.

<input checked="" type="checkbox"/> EYEGLASSES		CAMERA VIEWER
<input type="checkbox"/> SUNGLASSES		BINOCULARS
<input checked="" type="checkbox"/> WINDSHIELD		TELESCOPE
<input checked="" type="checkbox"/> SIDE WINDOW OF VEHICLE		THEODOLITE
<input type="checkbox"/> WINDOWPANE		OTHER
A. DO YOU ORDINARILY WEAR GLASSES? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		B. DO YOU USE READING GLASSES? <input type="checkbox"/> YES <input type="checkbox"/> NO

18. WHAT WAS YOUR IMPRESSION OF THE SPEED OF THE PHENOMENON? GIVE ESTIMATE OF SPEED 50 TO 150 MPH  
*Speed Variable From Time to Time*

19. WHAT WAS YOUR IMPRESSION OF THE DISTANCE OF THE PHENOMENON? GIVE ESTIMATE OF DISTANCE 2-5 MI.

20. IN ORDER THAT WE MAY OBTAIN AS CLEAR A PICTURE AS POSSIBLE OF WHAT YOU SAW, DESCRIBE IN YOUR OWN WORDS A COMMON OBJECT OR OBJECTS WHICH, WHEN PLACED IN THE SKY, SIMILAR TO WHERE YOU NOTED THE PHENOMENON, WOULD BEAR SOME RESEMBLANCE TO WHAT YOU SAW. DESCRIBE SIMILARITIES AND DIFFERENCES BETWEEN THE COMMON OBJECT AND WHAT YOU SAW.

*8 CATS with Bright Lights All over them.*

21. DID YOU NOTICE ANY ODOR, NOISE, OR HEAT EMANATING FROM THE PHENOMENON OR ANY EFFECT ON YOURSELF, ANIMALS OR MACHINERY IN THE VICINITY?  YES  NO. IF "YES," DESCRIBE.

A. DID THE PHENOMENON DISTURB THE GROUND OR LEAVE ANY PHYSICAL EVIDENCE.  YES  NO. IF "YES," DESCRIBE.

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 Authority: AWD-92222  
 By: EM DATE: 01/20/01

22. HAVE YOU EVER SEEN THIS OR A SIMILAR PHENOMENON BEFORE?  YES  NO. IF "YES," GIVE DATE AND LOCATION.

23. WAS ANYONE WITH YOU AT THE TIME YOU SAW THE PHENOMENON?  YES  NO. IF "YES," DID THEY SEE IT TOO?  
 YES  NO.

A. LIST THEIR NAMES AND ADDRESSES  
AIC O'CONNOR  
AIC [REDACTED] PLs see AMW with O'Connor Name not known  
AIC [REDACTED] AIC JOSEPH JABLONSKI  
SSgt. [REDACTED] SSgt JAMES BOND

24. THE FOLLOWING INFORMATION ABOUT YOURSELF

LAST NAME, FIRST NAME, MIDDLE NAME ADAMS, GREGORY  
ADDRESS (Street, City, State and Zip Code) BOX 1294  
[REDACTED] MIAMI AFB NO. DAK 59701  
TELEPHONE [REDACTED] DUTYPHONE 3942 AGE 20  MALE  FEMALE

INDICATE ADDITIONAL INFORMATION INCLUDING OCCUPATION AND ANY EXPERIENCE WHICH MAY BE PERTINENT.

Security Policeman  
742nd SMS - November Flight  
Security Alert Team Leader

25. WHEN AND TO WHOM DID YOU REPORT THAT YOU HAD SIGHTED THIS PHENOMENON?  
NAME: SSgt. James Bond DAY 24 MONTH OCT YEAR 68

26. DATE YOU COMPLETED THIS QUESTIONNAIRE.  
DAY 25 MONTH OCT YEAR 68

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Authority: AFD-900001  
By: JEM, HAD, DML, PAM



27. INFORMATION WHICH YOU FEEL IS PERTINENT BUT WHICH IS NOT ADEQUATELY COVERED IN THIS QUESTIONNAIRE,  
ALTERNATIVELY PROVIDE A NARRATIVE EXPLANATION OF THE SIGHTING.

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Authority: *MND 903723*  
BY: *SEM HWA DLS 7/08*