



UNCLASSIFIED

DEPARTMENT OF THE AIR FORCE  
STAFF MESSAGE BRANCH  
INCOMING MESSAGE

Pg1 of 2

AFIN : 52440 (7 Apr67) S/erg

ACTION: RDC-4 INFO: SAFOS-3, DIA-1, XOP-1, XOPX-2, NIN-7 (19) ADV CY DIA

SMB B170

PTTU JAW RUWJEMA3428 0970700-UUUU--RUEDHQA.

ZNR UUUUU

P 062303Z APR 67

FM TFW C NELLIS AFB NEV

TO RUWMFVA/ADC

RUWJBJA/27 ADV LUKE AFB

RUEDFIF/FTD

RUEDHQA/CSAF

RUEDHQA/OSAF WASH DC

ZEN/UNIV OF COLORADO BOULDER CO 80302

ATTN: DR CONDON

BT

UNCLAS C-DI 00021 APR 67

FOR FTD WPAFB OHIO (TDETR), CSAF (AFRDC), OSAF/ (SAF-01).

UFO. THE FOLLOWING REPORT IS IAW AFR 80-17, PARAGRAPH 11A:

(1) STAR SHAPED, (2) THREE TIMES SIZE OF A STAR, (3) ORANGE,  
(4) ONE, (5) NA, (6) NONE, (7) NONE, (8) NONE, (9) NONE

PARAGRAPH 11B: (1) LOOKING AT SKY, (2) 80 DEGREES, (3) 80 DEGREES,

(4) WEST TO EAST, THEN NORTH, (5) INSTANTLY TO THE NORTH, PIECE OF

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Pg 2 of 2

SILVER DROPPED OFF THE BOTTOM, (6) FIVE MINUTES, PARAGRAPH 11C:  
(1) GROUND-VISUAL, (2) NONE, (3) NA, PARAGRAPH 1D: (1) 4 APR  
0600Z, AND 3 APR 2200 LOCAL, (2) NIGHT, PARAGRAPH 1E: ONE-QUARTER  
PAGE 2 RUWJEMA3428 UNCLAS  
MILE FROM NEV SO UNIV IN UNIV PARK, GROVE CIRCLE, PARAGRAPH 11F:  
(1) [REDACTED] 25; [REDACTED], LAS VEGAS,  
NEV; DRAFTSMAN; HIGH SCHOOL, NOT VERY RELIABLE. PARAGRAPH 11G:  
(1) GOOD, (2) SURFACE 030 DEGREES 2K; 6,000 FT 200 DEGREES 2K;  
10,000 FT 200 DEGREES 30 K; 16000 FT 200 DEGREES 55K; 20,000 FT  
210 DEGREES 62K; 30,000 FT 210 DEGREES 9K; 50,000 FT 220 DEGREES  
85K; (3) HIGH THIN OVERCAST, (4) 15 PLUS, (5) TEN TENTHS, (6) NONE  
(7) SURFACT TO 37,000 FT - MINUS 2.08 C/1000 FT; 37,000 TO 45,000 FT  
- MINUS POINT 25 C/1000 FT; 45,000 TO 50,000 FT - POINT 200/1000  
FT; TROPOPAUSE 37,000 FT. PARAGRAPH 11I: NONE. PAR 11J. NONE.  
PARAGRAPH 11K: 2LT PETER B THATCHER, UFO REPORTING OFFICER,  
NELLIS AFB, NEV. CAUSE UNKNOWN, COULD HAVE BEEN LANDING LIGHTS ON  
AIRCRAFT.

BT

NNNN

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*Balloon (Hot Air)*

*4 Apr 67*

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



REPLY TO  
ATTN OF TDET/UFO

14 April 1967

SUBJECT UFO Observation, 4 Apr 67

*4 Apr 67*

*Las Vegas, Nevada*

TO:

[REDACTED]  
Las Vegas, Nevada 89109

Reference your unidentified observation. The information which we have received is not sufficient for a scientific evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided. Thank you for reporting your observation to the Air Force.

*JCM*  
JAMES C. MANATT, Colonel, USAF  
Director of Technology and Subsystems

1 Atch  
FTD Form 164 w/envelope

UFO OFFICIAL FILE COPY

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?

4 Day      APRIL Month      1967 Year

2. Time of day:

10 Hour      30 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?

[REDACTED] Nearest Postal Address      CIR. City or Town      LAS VEGAS City or Town      NEVADA State or County

5. How long was object in sight? (Total Duration)

00 Hours      5 Minutes      00 Seconds

a. Certain      c. Not very sure  
b. Fairly certain       d. Just a guess

5.1 How was time in sight determined? \_\_\_\_\_

5.2 Was object in sight continuously?      Yes       No \_\_\_\_\_

6. What was the condition of the sky?

DAY      NIGHT  
a. Bright       a. Bright  
b. Cloudy      b. Cloudy

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One): a. In front of you      d. To your left  
b. In back of you      e. Overhead  
c. To your right      f. Don't remember

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None  
 b. A few  
 c. Many  
 d. Don't remember

8.2 MOON (Circle One):

- 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):

- a. Clear sky  
 b. Hazy  
 c. Scattered clouds  
 d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry  
 b. Fog, mist, or light rain  
 c. Moderate or heavy rain  
 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 remember

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

IT LOOKED LIKE  
 AN AIRCRAFT LIGHT!

11.1 Compare brightness to some common object:

APPROX. TWO OR THREE TIMES BRIGHTER THAN SIRIUS

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?           | <input checked="" type="radio"/> Yes | No                                  | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| c. Break up into parts or explode?              | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| d. Give off smoke?                              | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| e. Change brightness?                           | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| f. Change shape?                                | Yes                                  | <input checked="" type="radio"/> No | Don't know |
| g. Flash or flicker?                            | <input checked="" type="radio"/> Yes | No                                  | Don't know |
| h. Disappear and reappear?                      | Yes                                  | <input checked="" type="radio"/> No | Don't know |

14. Did the object disappear while you were watching it? If so, how? AFTER THE OBJECT STOPPED MOVING TWO VERY FAINT STAR LIKE OBJECTS DROPPED ~~OUT THE~~ FROM BELOW THE OBJECT. IT THEN FLAURED UP IN BRIGHTNESS AND ~~DISA~~ DISAPPEARED AS IF SOMEONE HAD TURNED OFF A LIGHT. THE TWO OBJECTS DROPPED OUT APPROX. 1/2 TO 1 SECOND APART.

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):

~~Yes~~

No

Don't Know.

IF you answered YES, then tell what

it moved behind: \_\_\_\_\_

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

in front of: \_\_\_\_\_

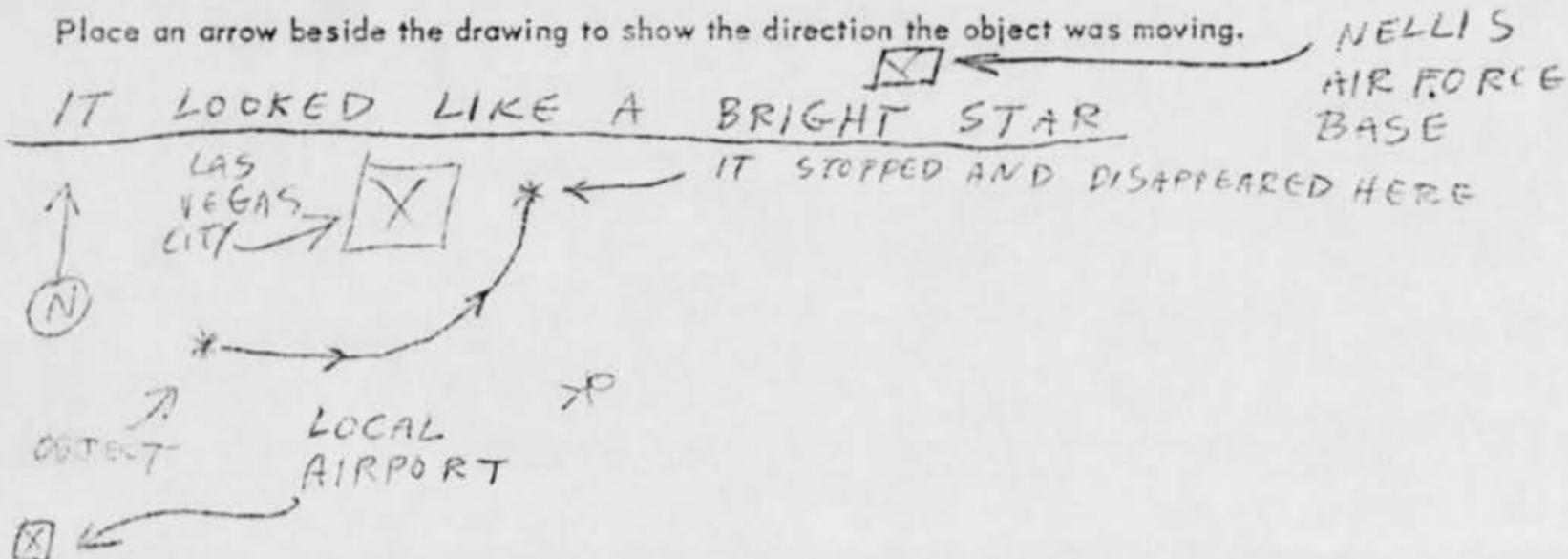
17. Tell in a few words the following things about the object:

a. Sound NO SOUND

b. Color BRIGHT ORANGE

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head? ALL OF IT

19. 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.



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 estimate? \_\_\_\_\_

21. 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 you say it was? \_\_\_\_\_

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 \_\_\_\_\_

23. Were you (Circle One)

- a. In the business section of a city?
- b. In the residential section of a city?
- c. In open countryside?
- d. Near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other \_\_\_\_\_

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

- |              |              |              |              |
|--------------|--------------|--------------|--------------|
| a. North     | c. East      | e. South     | g. West      |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

24.2 How fast were you moving? \_\_\_\_\_ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)

Yes

No

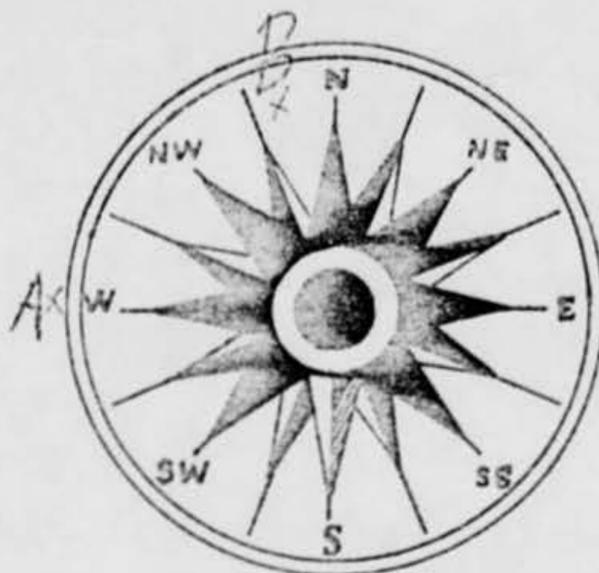
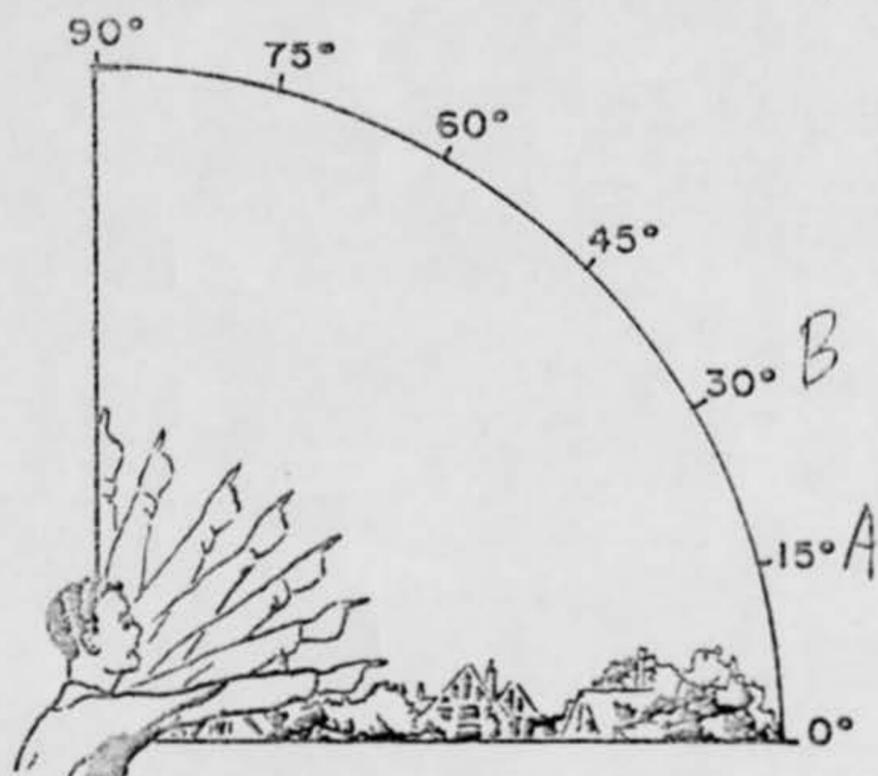
25. Did you observe the object through any of the following?

- |                 |     |                                     |               |                       |                                     |
|-----------------|-----|-------------------------------------|---------------|-----------------------|-------------------------------------|
| a. Eyeglasses   | Yes | <input checked="" type="radio"/> No | e. Binoculars | Yes                   | <input checked="" type="radio"/> No |
| b. Sun glasses  | Yes | <input checked="" type="radio"/> No | f. Telescope  | Yes                   | <input checked="" type="radio"/> No |
| c. Windshield   | Yes | <input checked="" type="radio"/> No | g. Theodolite | Yes                   | <input checked="" type="radio"/> No |
| d. Window glass | Yes | <input checked="" type="radio"/> No | h. Other      | <u>NAKED EYE ONLY</u> |                                     |

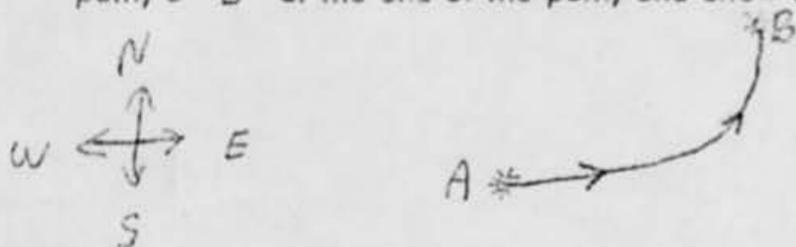
26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

AN AIRCRAFT ~~LIKE~~ LIGHT, A STAR (ORANGE) BRIGHTER THAN SIRIUS, A FLARE, ANY BRIGHT, STARLIKE OBJECT.

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.



29. IF there was MORE THAN ONE object, then how many were there? 3  
Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

I ONLY SAW THREE OBJECTS ONLY AFTER THE PRIMARY ONE HAD STOPPED MOVING AND THE TWO FAINT OBJECTS MENTIONED EARLIER DROPPED OUT AT APPROX.  $\frac{1}{2}$  TO 1 SECOND APART.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

NO

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:

THE PERSON MENTIONED ABOVE MOVED AND LEFT NO FORWARDING ADDRESS; HOWEVER, SEVERAL CHILDREN LIVING AT MY ADDRESS SAW THE OBJECT.

32. Please give the following information about yourself:

NAME

[REDACTED]  
Last Name

[REDACTED]  
First Name

[REDACTED]  
Middle Name

ADDRESS

[REDACTED]  
Street

LAS VEGAS  
City

[REDACTED]  
Zone

NEVADA  
State

TELEPHONE NUMBER

[REDACTED]

AGE

25

SEX

M

Indicate any additional information about yourself, including any special experience, which might be pertinent.

I AM AN AMATEUR ASTRONOMER. I HAVE BEEN INTERESTED IN U.F.O.'S FOR SOME TIME. I HAVE 20-90 VISION AND PERFECT COLOR VISION, I AM NEAR SIGHTED.

33. When and to whom did you report that you had seen the object?

5  
Day

APRIL  
Month

1967  
Year

I REPORTED IT TO THE U.F.O. OFFICER AT NELLIS AIR FORCE BASE, NEVADA.

34. Date you completed this questionnaire:

19 APRIL 1967  
Day 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.

MANY U.F.O.'S HAVE BEEN SIGHTED HERE IN LAS VEGAS. MOST OF THEM PROVED TO BE EXPERIMENTS CARRIED ON BY THE AIR FORCE AT VANDENBERG OR SOME SORT OF WEATHER EXPERIMENT. THE OBJECT I SAW CHANGED BRIGHTNESS SUCH AS AN EARTH SATELLITE WOULD DO WHEN TURNING ON ITS AXIS. WHEN IT DISAPPEARED I THINK SOME MATERIAL FELL OFF IT. I BELIEVE IT WAS A WEATHER EXPERIMENT OF SOME SORT.

---

IF POSSIBLE WOULD YOU PLEASE SEND ME ANOTHER FORM FTD 169. IF SO, PLEASE MAIL IT TO THE FOLLOWING ADDRESS:

  
No. LAS VEGAS, NEVADA 89030

I WOULD APPRECIATE IT VERY MUCH.  
THANK YOU!

