

RESTRICTED

FEDERAL BUREAU OF INVESTIGATION

UNIDENTIFIED AERIAL OBJECTS

Incident No. _____

1. Date of Observation _____ Date of Interview _____
2. Exact time of observation (local) _____
3. Place of Observation :
(Map Coordinates)
4. Position of observer (air, car, bldg, location of - give details:
5. What attracted attention to object:
6. Number of objects and sketch of formation or grouping:
7. Apparent size (compare to known object, i. e., sun, moon, thumb or fist at arms length):
8. Color of object:
9. Shape (give graphic description - compare with known object):
10. Altitude (Angle of elevation above horizon - 0° at horizon, 90° overhead):
11. Direction from observer (Angle clockwise from North):
12. Distance from observer (Distance to town, bldg, etc., over which object appeared to be):
13. Direction of flight of object (s):
14. Time in sight:
15. Speed (time to cover given angular distance):
16. Sound and odor:

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