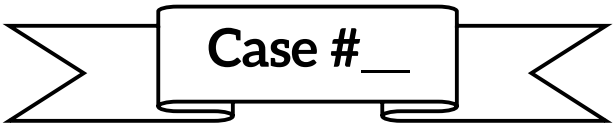

Investigator Name: _____

Investigation Date: _____

Sighting Date: _____

Sighting Time *(if known):* _____

Was it? ___ Daytime *or* ___ Nighttime

Sighting Location: _____

Number of Witnesses: _____

Witness Name(s): *(this can be you or someone else)*

_____

How many objects were observed: _____

Draw a picture of the sighting on the next page. Include any background objects that were seen during the sighting as well.

Draw the Sighting

Shape of object(s):

___ Round or sphere
___ Triangle or pyramid
___ Tic-tac or cigar-shaped
___ Other: _____
___ Star
___ Disc or oval
___ Square or cube

Did the object have lights? ___ Yes ___ No

If yes, describe them: _____

_____

Did the object make a sound? ___ Yes ___ No

If yes, describe it: _____

_____

Color of object(s): _____

Object(s) movement: (*check all that apply)*

___ Hovered / Stayed still
___ Spun around
___ Changed direction
___ Zigzag or wavy line
___ Other: _____
___ Changed shape
___ Blinked
___ Straight line

Speed of object(s):

___ Faster than a plane
___ Slower than a plane
___ About the same speed as a plane
___ It did not move
___ Not sure

How long was the sighting?

___ Less than 10 seconds
___ 30 seconds to 1 minute
___ More than 5 minutes
___ 10-30 seconds
___ 1-5 minutes

What direction did the object(s) come from?

(Tip: Use your compass if needed.)

___ North ___ East ___ South ___ West

___ Northeast ___ Northwest

___ Southeast ___ Southwest

What direction did the object(s) travel to?

___ North ___ East ___ South ___ West

___ Northeast ___ Northwest

___ Southeast ___ Southwest

Where was the witness when they saw the object?

___ Inside-*looking out a window*

___ Outside

___ Vehicle window (*circle one)* MOVING *or* STILL

What was the approximate angle of elevation?

___ Low in the sky (0° - 30°)

___ Middle of the sky (31° - 60°)

___ High in the sky (61° - 90°)

If you measured the angle of elevation using your inclinometer, enter it here: _____

What other objects were seen during the sighting?

___ None ___ Airplane

___ Bird or Bat ___ Helicopter

___ Satellite ___ Balloon

___ Moon ___ Planet or bright star

___ Other: _____

Weather conditions: *(check all that apply)*

___ Partly cloudy
___ Clear (no clouds)
___ Windy
___ Snowing
___ Thunderstorm
___ Other: _____

___ Very cloudy
___ Sunny
___ Foggy
___ Raining

Are there photos or videos of the sighting?

___ Yes (*How many?* ____) ___ No

List any other important details below.

Based on my investigation, I believe the object is:

____ UFO - Unidentified or Unknown Object

____ IFO – Identified or Known Object

For an IFO, mark which one you identified below:

___ Airplane
___ Helicopter
___ Meteor
___ Moon
___ Satellite
___ Bird
___ Balloon
___ Planet or bright star
___ Other: _____

Reason for my decision: _____

_____