

International UFO Bureau

In Cooperation With Canadian UFO Report Magazine

P. O. Box 1281

SIGHTING
FORM

A - UFO REPORTS

OKLAHOMA CITY, OKLAHOMA 73103

1. NAME *Jimmy Carter* PLACE OF EMPLOYMENT
ADDRESS *State Capital* OCCUPATION *Governor*
Atlanta EDUCATION *Graduate*
TELEPHONE *404-656-1776* SPECIAL TRAINING *Aviation Physics*
MILITARY SERVICE *US NAVY*
2. DATE OF OBSERVATION *Oct 1969* TIME AM PM TIME ZONE
7:15 EST
3. LOCALITY OF OBSERVATION *Leary, Georgia*
4. HOW LONG DID YOU SEE THE OBJECT? HOURS *10-15* MINUTES SECONDS
5. PLEASE DESCRIBE WEATHER CONDITIONS AND THE TYPE OF SKY; I.E., BRIGHT DAYLIGHT, NIGHTTIME, DUSK, ETC. *Shortly after dark.*
6. POSITION OF THE SUN OR MOON IN RELATION TO THE OBJECT AND TO YOU. *Not in sight*
7. IF SEEN AT NIGHT, TWILIGHT, OR DAWN, WERE THE STARS OR MOON VISIBLE? *Stars*
8. WERE THERE MORE THAN ONE OBJECT? *no* IF SO, PLEASE TELL HOW MANY, AND DRAW A SKETCH OF WHAT YOU SAW, INDICATING DIRECTION OF MOVEMENT, IF ANY.
9. PLEASE DESCRIBE THE OBJECT(S) IN DETAIL. FOR INSTANCE, DID IT (THEY) APPEAR SOLID, OR ONLY AS A SOURCE OF LIGHT; WAS IT REVOLVING, ETC? PLEASE USE ADDITIONAL SHEETS OF PAPER, IF NECESSARY.
10. WAS THE OBJECT(S) BRIGHTER THAN THE BACKGROUND OF THE SKY? *yes*
11. IF SO, COMPARE THE BRIGHTNESS WITH THE SUN, MOON, HEADLIGHTS, ETC. *at one time bright as moon*
12. DID THE OBJECT(S) -- (PLEASE ELABORATE, IF YOU CAN GIVE DETAILS.)
A. APPEAR TO STAND STILL AT ANY TIME? *yes*
B. SUDDENLY SPEED UP AND RUSH AWAY AT ANY TIME? *yes*
C. BREAK UP INTO PARTS OR EXPLODE?
D. GIVE OFF SMOKE?
E. LEAVE ANY VISIBLE TRAIL?
F. DROP ANYTHING?
G. CHANGE BRIGHTNESS? *yes*
H. CHANGE SHAPE? *size*
I. CHANGE COLOR? *yes*
Seemed to move back us from a distance, stop, move gradually away when they departed. Flicker at first. Then reddish - luminous. Not solid.
13. DID THE OBJECT(S) AT ANY TIME PASS IN FRONT OF, OR BEHIND OF, ANYTHING? IF SO PLEASE ELABORATE GIVING DISTANCE, SIZE, ETC, IF POSSIBLE. *no*
14. WAS THERE ANY WIND? *No* IF SO, PLEASE GIVE DIRECTION AND SPEED. 
15. DID YOU OBSERVE THE OBJECT(S) THROUGH AN OPTICAL INSTRUMENT OR OTHER AID, WINDSHIELD, WINDSHIPANE, STORM WINDOW, SCREENING, ETC? *no* WHAT?
16. DID THE OBJECT(S) HAVE ANY SOUND? *no* WHAT KIND? HOW LOUD?
17. PLEASE TELL IF THE OBJECT(S) WAS (WERE) --
A. FUZZY OR BLURRED.
B. LIKE A BRIGHT STAR.
C. SHARPLY OUTLINED.