



Form 9-Photographic-Film Camera Cases	
Case Number: _____	Date: _____
Describe On Form 1 The Sequence Of Events As To How You Photographed The UFO(s)	
Camera Data	Camera Mode When UFO(s) Photographed
Type : _____ Age: _____	"F" Stop Nr : Photo: [1] _____ [2] _____ [3] _____
Manufacturer _____ Model: _____	[4] _____ [5] _____ [6] _____
Lens Diameter and Focal Len _____	Shutter Speed: Photo: [1] _____ [2] _____ [3] _____
Lens Manufacture _____	[4] _____ [5] _____ [6] _____
Shutter Speed Range: From : _____ To: _____	Distance Set: Photo: [1] _____ [2] _____ [3] _____
"F" Stop Range : From : _____ To: _____	[4] _____ [5] _____ [6] _____
Distance Setting: Fixed [] Variable [] Auto []	Settings / Type: Manual [] Automatic []
Notes: _____	Notes: _____
Film Data	Camera Accessories / Methods Used
Type: _____ Brand : _____	Tripod [] Stand [] Panning [] Other: _____
Manufacturer: _____	Filters: Color: _____ Density: _____
Film Type: Color [] B&W [] ASA: [] _____	Telephoto Info: _____
Age of Film: _____ Exp Date: _____	Lens Multiplier: _____
Notes: _____	Notes. : _____
Photographic Data	
Direction Camera Pointed: Photograph # [1] _____ [2] _____ [3] _____ [4] _____ [5] _____ [6] _____	
Elevation Camera Pointed : Photograph # [1] _____ [2] _____ [3] _____ [4] _____ [5] _____ [6] _____	
Other Objects Discernable In Photographs (such as buildings, trees, hills, aircraft, clouds, etc.)	
A _____ In Photo # _____ Size: _____ Distance: _____ Direction: _____	
A _____ In Photo # _____ [Size: _____ Distance: _____ Direction: _____	
A _____ In Photo # _____ [Size: _____ Distance: _____ Direction: _____	
A _____ In Photo # _____ [Size: _____ Distance: _____ Direction: _____	
Basic Data	
# of Photos or Footage: _____ Sighting Date: _____	
Still Photographs? [] Movies? [] Video? [] Sighting Location: _____	
# of UFOs Photographed : _____ Photographed By: _____	
Daylight: _____ Night: _____ Investigated By: _____	
Available To MUFON: Originals: _____ Copies: _____ Negatives: _____	
Analysis Done By: _____ Evaluation: _____	
Notes: _____	



Statement of Authorization

I am the sole owner of the aforementioned photographs, video and or movie footage, and as such, am authorized to release any material to MUFON for evaluation/examination. You may [], may not [] use my name in connection with this report.

Witness Signature: _____

Date: _____