



Photographic Cases

MUFON Form 8A

Case Number: _____

Digital Cameras

Describe On Form 1 The Sequence Of Events As To How You Photographed The UFO(s)

Witness/Photographer Data

Witness: _____
 Address: _____
 City, State, Zip: _____
 Phone: _____

Photographer: _____
 Address: _____
 City, State, Zip: _____
 Phone: _____

Digital "Still" Camera Photographs

Number Of Images Submitted : _____
 Manufacturer. : _____
 Megapixels . . . : _____ Mode: Manual () Auto ()
 Manual Setting: _____
 Resolution Mode: (Low, Medium, High, Fine: _____
 Media Storage: (Flash, Memory Card (Type): _____
 Lens Type: _____ Filter(s): _____
 Cell Phone: Mfg, Model: _____
 Megapixel Count : _____

Video Camera

Camera Manufacturer . : _____
 Memory Storage Type . : _____
 Filters Used (if any) . . . : _____
 Est. Time of Submitted Video . . : _____

Computer Enhancements (if any)

Computer Platform (IBM XP, Apple, Etc) : _____
 Image Processing Software : _____
 Version: _____
 Enhancements (if any): _____

Photographic Data

Direction Camera Pointed : Image # 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____
 Elevation Camera Pointed : Image # 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____

Other Objects Discernable In Photographs (such as buildings, trees, hills, aircraft, clouds, etc.)

A _____ In Image # _____ (Size: _____ Distance: _____ Direction: _____)
 A _____ In Image # _____ (Size: _____ Distance: _____ Direction: _____)
 A _____ In Image # _____ (Size: _____ Distance: _____ Direction: _____)
 A _____ In Image # _____ (Size: _____ Distance: _____ Direction: _____)

Basic Data

Number of Photos or Footage . . : _____ Sighting Date : _____
 Still Photographs? () Movies? () Video? () Sighting Location. . : _____
 Number of UFOs Photographed : _____ Photographed By. . : _____
 Daylight . . : _____ Night. . : _____ Investigated By . . . : _____
 Available To MUFON . . : _____
 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. . : _____