



UFORCOP SPECIAL EDITION
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Welcome to UFORCOP'S SPECIAL
EDITION

**A fellow researcher Kathleen Marden is looking for information needed
in her research. Please read below.**



Kathleen Marden
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My work with abduction experiencers over the past 21 years has convinced me that we are indeed being visited and that we have quite possibly collected most of the physical evidence available. I and others have, however, discovered commonalities in abductee's statements pertaining to E.T. technology. I am planning to present a lecture about this evidence at MUFON's 2012 International Symposium in Covington, KY. In order to enhance the scientific value of my study, I am asking experiencers to assist me in gathering as much information as possible. If you are an abduction experiencer and have observed E.T technology aboard an unconventional flying object, please complete this questionnaire. You can download the questionnaire above. For your information, the questions are listed below. Use the back side or additional pages to explain your observations in as much detail as possible. There is no need to reveal your identity. However, if you wish to be contacted, please sign the Informed Consent Form. Please mail your survey to Kathleen Marden, P.O Box 120172, Clermont, FL 34736 or Kmarden@aol.com . Thank you very much.

The UFO Abduction Experiencer questionnaire is part of a research project that Florida MUFON's Chief Investigator, Denise Stoner and I are working on. It is a simple, straightforward questionnaire. The results will be published in the MUFON Journal. There is no need to share any identifying information about yourself. However, if you wish to be contacted, please complete the Informed Consent Form on the menu. Your identity will be considered confidential. Please mail this questionnaire to Kathleen Marden, PO Box 120172, Clermont, FL 34712 or email it to me at Kmarden@aol.com. Thank-you.

You can download the survey on the link listed above. Please answer all of the questions to the best of your ability. If you prefer not to answer a question, leave it blank. If you wish to explain or elaborate on any answer, please use the space provided on the back of each page. Be sure to include the question number.

UFO Abduction Experiencer Questionnaire

1. Sex: M () F ()
2. Age: Under 20 (), 20-30 (), 30-40 (), 40-50 (), 50-60 (), 60-70 (), 70-80 (), over 80 ()
3. Area of Residence: Rural (), Small Town (), Suburban (), Urban ()
4. Time Zone: Eastern (), Central (), Mountain (), Pacific ()
5. Age when first abduction/contact occurred _____
6. Age when most recent abduction/contact occurred _____
7. How many times do you think you've been abducted/contacted? 1 (), 2-5 (), 5-10 (), over 10 ()
8. Was anyone with you when you were abducted/contacted? Yes (), No ()
9. If you answered yes to # 8, did they recall the experience? Yes (), No () If yes, please explain on back of page.
10. Are your abduction/contact recollections conscious? (), through dreams? (), through hypnosis?
() Other () (Please check all that apply.)
11. Do you consciously recall (not with hypnosis), the observation of an unconventional craft at less than 1000 feet
prior to an abduction? Yes (), No ()
12. Do you consciously recall (not with hypnosis), the observation of non-human entities immediately prior to an
abduction while you were outside your home? Yes (), No ()
13. Do you think that your abductions/contacts now ended? Yes (), No () Not sure. If yes, at what age? _____

14. Have you witnessed paranormal activity in your home? Yes (), No () If so, please describe it on the back of this page.

15. If you answered yes to # 14, did it begin prior to or after your first abduction? Yes (), No ()

16. Have you ever received telepathic messages? Yes (), No ()

17. If you answered yes to # 16, was it related to an abduction/contact experience? Yes (), No ()

18. Do you feel you have been given a gift of healing following the abduction/contact? Yes (), No ()

19. Are you more or less “sensitive” or intuitive than you were prior to your abduction/contact? More (), Less (), about the same ()

20. Did you develop new psychic abilities after your abduction/contact? Yes (), No ()

21. Have witnesses reported that they observed a UFO near your house, vehicle, tent, etc. prior to or during your abduction? Yes (), No () If yes, please explain on back of page.

22. In what age range did your most frequent abductions/contacts occur? Under 20 (), 20-30, (), 30-40 (), Over 40 ()

23. How frequent were they?

24. What is your typical response to abduction/contact? Curiosity (), Fear (), Despair (), pleasure ()

25. How did you feel after an abduction/contact experience?

26. Have you awoken with unexplained marks on your body that you suspect were related to an abduction/contact?

Yes (), No () If yes, please describe on back of page.

- 27. If you are a female, have you experienced a gynecological problem that you suspect is related to an abduction experience? Yes (), No () If yes, please describe?**
- 28. Do you suffer from somnambulism (sleep walking)? Yes (), No ()**
- 29. On a daily basis, How would you describe your mood? Happy (), Sad (), Frequent mood swings (), Without unusual highs and lows ()**
- 30. As a child, how would you describe your mood? Happy (), Sad (), Frequent mood swings (), Without unusual highs and lows ()**
- 31. What do you use as a daily coping mechanism to deal with any fear or anxiety due to your abduction experience?**
- _____
- 32. Can you feel a foreign object in your body that you suspect is an alien implant? Yes (), No () If yes, where is it located? _____**
- 33. After your abduction/contact did you notice any of the following? More acute hearing? Yes () No (). More sensitive to light? Yes (), No (). More allergies? Yes (), No (). More fluctuation in your mood? Yes (), No ()**
- 34. Do you ever feel that you are invisible and others can't see you? Yes (), No ()**
- 35. Do you have difficulty falling asleep? Yes (), No () Staying asleep? Yes (), No ()**
- 36. Have you been diagnosed as having Chronic Fatigue Syndrome or Reactivated Mononucleosis? Yes (), No ()**

37. What is your blood type? A (), B (), O (), AB () Is it positive? () Negative? ()

38. Do you suffer from Migraine Headaches? Yes (), No ()

39. Have you ever suffered burns, hair loss, or conjunctivitis following an abduction? Yes (), No ()

40. Have you noticed strange skin rashes immediately following an abduction? Yes (), No ()

41. Has your doctor noted changes in your blood chemistry, blood clotting easily, or bleeding too freely after an abduction? Yes (), No ()

42. Has your nose bled immediately following an abduction? Yes (), No ()

43. Do you crave excessive amounts of salt? Yes (), No () If yes, does your blood test indicate a high sodium count Yes (), No ()

44. Are you aware of having been examined on an alien craft? Yes (), No ()

45. Following an abduction/contact, did you ever experience malfunctions of electrical equipment such as lights, digital watches, computers, etc? Yes (), No () If yes, please explain on back.

Informed Consent Form

This informed consent form is for individuals who have experienced alien abduction and who wish to participate in completing a questionnaire designed to identify commonalities among the UFO abduction experiencers.

Abduction researchers, Kathleen Marden and Denise Stoner, are inviting you to participate in these fact finding questionnaires. We have been providing

support and insight into the alien abduction phenomenon for a combined total of more than 40 years. Our goal on the first form is to provide experiencers and the UFO community information about the unique constellation of demographic, social, emotional and medical commonalities that experiencers share. The second form identifies alien technology that experiencers have observed on the craft.

These questionnaires can benefit abductees by demonstrating that they are not alone. Those who have already completed the form have stated that they viewed it as a positive experience. However, we wish to caution you to be sensitive to your own emotions. If recalling your abduction memories is distressing, we advise you not to participate in these questionnaires. Participation is purely voluntary. We are asking you to help us learn more about commonalities in alien abduction experiences.

We will not ask you to share personal beliefs, practices or stories and you do not have to share any knowledge that you are not comfortable sharing.

You do not have to decide today whether or not you wish to participate in filling out these questionnaires. You may wish to return to them at any time. Completing each questionnaire will take approximately 30 minutes of your time. You can send them via email or via US mail. Specific instructions are listed on the top of each questionnaire. You may contact Kathleen Marden at Kmarden@aol.com or Denise Stoner at dms.mufonssd@yahoo.com with questions and we will do our best to answer them to your satisfaction.

No one will be identified by name. Any personal information that you volunteer on the form is confidential and no one except Denise Stoner and Kathleen Marden will have access to your personal information, if you decide to include it on the forms. However, you may choose to remain anonymous. Completed questionnaires will be tallied and locked in a secure location. Your questionnaire will be shredded at the end of this study. If you wish to have your form returned to you, please supply your name and address.

I have read the foregoing information and have had the opportunity to ask questions about it and any questions I have been asked have been answered to my satisfaction. I consent voluntarily to be a participant in completing this questionnaire. Please sign below only if you wish to make your identity known to Kathleen Marden and Denise Stoner. It is our goal to protect your anonymity.

Print Name of Participant _____

Signature of Participant _____

Address of Participant _____

Date _____

Abduction Experiencer E.T Technology Questionnaire

- 1. Were you abducted from an external environment (driving, camping, hunting, etc), or from inside your home (living room, den, bedroom, etc.)? External Environment (), Home (), Other (). Please explain.**
- 2. Were you transported through a solid object such as a wall, window, roof, etc.? Yes (), No ().**
- 3. What physical sensations did you experience during transport aboard the craft?**
- 4. What, if anything, did you observe during your transport aboard the craft?**
- 5. What mode of communication did the entities use with you? Telepathy (), Voice (), High tech communication device (), other (). Please explain.**
- 6. Did you experience a sudden shift in mood during your initial transport, such as fear to calmness and familiarity? Yes (), No (). Please explain.**
- 7. Was a technological device used to control your behavior? Yes (), No (). If yes, please explain.**
- 8. Did you observe a screen or levers, buttons, etc. on the walls? Yes (), No (). If yes, please describe them and what they were used for.**
- 9. Were you shown a holographic image? Yes (), No (). If so, where did it appear from and what did you see?**

10. **Did you feel that you were transported outside the Earth's atmosphere? Yes (), No () If yes, what do you recall of the experience and was a transport device used. If so, please describe.**
11. **Were you given knowledge of the craft's propulsion or operational system? Yes (), No (). If yes, please explain what you were told.**
12. **Did you observe this technology? Yes (), No (). If yes, please explain and sketch what you observed.**
13. **Have you ever undergone a procedure on the craft that was unrelated to reproduction? If so, please describe.**
14. **What type/(s) of beings did you encounter on the craft? Tall Grays (), Short Greys (), Reptilians (), Insectoid (), Nordic (), Other. Please describe.**
15. **Did you receive special knowledge about their physical composition? Yes (), No (). If yes, please explain.**
16. **Did you observe symbols on the craft? Yes (), No () If yes, please sketch them. (They will not be published or displayed and will be kept in a locked file.)**

Thank you again for contributing to my research.

Note: If you have the time and inclination to do so, please complete the UFO Abduction Experiencer Survey listed above.

Thank you for your participation in Kathleen's very important research.

