



EPW / Detainee Guide



SEARCH for weapons, documents. After thorough search, person must be allowed to maintain:

- Protective clothing
- Shoes or shoe laces
- helmet
- rank
- personal items (jewelry, watch, pictures)
- ID card
- wallet
- rucksack / luggage

- Secure all other items for S-2 for exploitation (maps, orders, diagrams, etc.)

SILENCE do not allow detainees to talk to each other. Gag only when necessary, and pay CLOSE attention to these individuals.

SEGREGATE the detainees by rank, sex, military from civilian, hostile from cooperative, etc.

SAFEGUARD detainees from danger on the battlefield, and from any reprisals by U.S. Forces or other detainees. It is our obligation to protect them from harm.

SPEED ensure all detainees are evacuated to collection points in timely manner, given the tactical and logistical situation.

TAG ensure all items found on detainee are recorded and placed in the same bag, along with a capture tag. Do not allow detainees to "sterilize" themselves by throwing away notebooks, money, cell phones, etc! Place one tag on detainee, one with gear, and retain one for records. This will also serve as a temporary receipt for the confiscated gear.

ENSURE the following is on capture tag:

1. DTG of capture
2. Place of capture (grids, town, street corners, specific bldg, etc)
3. Circumstances of capture (gave up without a fight, fought bravely, ran away, comforting dying comrades)
4. ALL documents / items found by capturing unit



Legal Obligations to EPW



HANDLE PERSON FIRMLY, PROMPTLY, AND HUMANELY

An EPW is a non-combatant, and you are obligated to protect him from the effects of the battlefield. The captive in your hands must be disarmed, secured, and watched, but he must also be treated at all times like a human being. He must not be tortured, killed, or degraded.

You **ARE** permitted to use the minimum amount of force necessary to make the detainee comply with instructions and to assure the safety of yourself, your fellow Soldiers, and other prisoners.

MISTREATMENT OF A CAPTIVE IS A CRIMINAL OFFENSE

It is dishonorable and foolish to mistreat a captive. It is also punishable under international treaty (which is Federal Law) and the UCMJ. Also remember that commanders are ultimately responsible for the conduct of their troops!!!

TREAT SICK / WOUNDED CAPTIVES AS BEST YOU CAN

The captive saved may possess valuable intelligence. In any case, he is protected under the Geneva Conventions and has a right to medical treatment. Enemy medical personnel can provide medical care for EPWs. Daily food and water rations must be provided in order to prevent weight loss or nutritional deficiencies.

ALL DETAINEES ARE CONSIDERED EPW'S AT OUR LEVEL

All detainees will be given the protected status of an EPW. An EPW or detainee cannot renounce his status, or switch sides to fight for the U.S.

REMEMBER, THE TAKING OF WAR SOUVENIRS IS STEALING !!!

EPW Matrix & Definitions

	Protection	Medical Care	ID Card	Relief agency visit	Complaints	Food / Water	Clothing	Shelter	Religious Activities	Reporting to EPW Agency	Tribunal to Determine Status	Mail	Capture Card	Compensation	Representation	Repatriation	Parole
GPW Article	12 - 16	13,15 20,30 31,46	17	125	78	26, 34	27	21 - 25	34, 38	122	5	70 - 77	70	60 - 63	79	109, 110, 118	21
Immediately after capture	X	X	X	X	X												
Within the shortest possible time						X	X	X	X	X	X						
Day 7												X	X				
Day 30														X			
6 Months (Day 180)															X		
End of Hostilities																X	
No Obligation, but permissible at any stage																X	X

- SECURITY AND SAFETY OF EPWs, GUARDS, AND OTHER PERSONNEL IS ALWAYS THE MAIN CONCERN !!!

Article 5 Tribunal - U.S. policy is to convene a 3 member panel which will make a factual determination of the status of the detainee. The panel does not determine punishment. It is also U.S. policy to treat all detainees with the same status as EPWs until their status has been determined.

Capture Card - A baseline of recorded data that should be maintained about an EPW. The recommended form contains fourteen (14) items: (1) power on which the prisoner depends, (2) name, (3) first names (in full), (4) first name of father, (5) date of birth, (6) place of birth, (7) rank, (8) service number, (9) address of next of kin, (10) taken prisoner on: (or) coming from (camp number, hospital), (11) (a) good health (b) not wounded (c) recovered (d) convalescent (e) sick (f) slightly wounded (g) seriously wounded, (12) present address is: [prisoner number and name of camp], (13) date, and (14) signature. Prisoners are only required to fill in items two, three, five, seven, and eight. If, for example, the prisoner is concerned that his family may suffer repercussions due to his capture or surrender, he is not required to provide his father's name or address of next of kin. GPW Article 70.

Clothing - Adequate clothing must be provided considering climate. EPWs may use their own uniforms.

Compensation - The detaining power shall grant all EPWs a monthly advance of pay based upon their rank. Article 60 of GPW establishes the amounts. EPWs shall also be paid for their labor, special skills, or services, at least one Swiss franc for a day's worth of labor. Labor rates should be established prior to the commencement of labor activities. EPWs can also receive monies from abroad, and may send their monies abroad. The detaining power can maintain control of the money by creating accounts for each EPW. Payments by the detaining power can be in the form of credits to the EPWs account.

Detainees - Persons in custody who have not been classified as an EPW, RP, or CI. All detainees shall be treated as EPWs until a legal status is ascertained by competent authority, such as an Article 5 Tribunal.

Detaining Power - Party who secures capture of EPW and thus gains responsibility for their treatment and security under the Geneva Convention.

Enemy Prisoner of War - A detained person as defined in Articles 4 and 5 of the Geneva Convention Relative to the Treatment of Prisoners of War of August 12, 1949. In particular, one who, while engaged in combat under orders of his or her government, is captured by the armed forces of the enemy. As such, he or she is entitled to the combatant's privilege of immunity from the municipal law of the capturing state for war like acts which do not amount to breaches of the law of armed conflict. A prisoner of war may be, but is not limited to, any person belonging to one of the following categories who has fallen into the power of the enemy: a member of the armed forces, organized militia or volunteer corps; a person who accompanies the armed forces without actually being a member thereof; a member of a merchant marine or civilian aircraft crew not qualifying for more favorable treatment; or individuals who, on the approach of the enemy, spontaneously take up arms to resist invading forces.

EPW Branch Camp - A subsidiary camp under supervision and administration of the main EPW camp.

EPW Camp - A camp set up by the U.S. Army for the separate internment and complete administration of EPWs. Camps shall not be located near military targets and should be clearly marked with the letters PW, PG, or other recognizable and visible marking.

Food Accommodations - Basic food rations shall be sufficient in quantity, quality, and variety to keep EPWs in good health while preventing the loss of weight or development of nutritional deficiencies. Account shall be taken for the habitual diet of the EPW, therefore no pork MREs or meals should be fed to Muslims. EPWs may use their own foodstocks and prepare their own food.

GPW - Geneva Convention Relative to the Treatment of Prisoners of War. August 12, 1949 (GENEVA CONVENTION III). Entry into Force: 21 October 1950

ID Cards - Identification cards are only required to contain name, rank, serial number, and date of birth. The Convention also allows a party to place any other information that it wishes on the card and specifically mentions the owner's signature or fingerprints as examples. The EPW must keep the ID Card in his possession at all times. As far as possible, the card should measure 6.5 X 10 cm. GPW Article 17.

Mail - No later than one week after capture, an EPW shall be able to write directly to his family, and shall also be entitled to receive mail. At a minimum, the capture card shall be mailed to notify the family. The detaining party can limit mail to 2 letters and 4 cards each month. No postage is required. Telegrams may also be permitted. Censorship with all communications is authorized, but must be conducted as quickly as possible.

Medical Care - The GPW requires that all wounded and sick shall be collected, cared for, and generally provided humane treatment. Medical inspections must be conducted at least once a month. GPW also requires that EPWs suffering from serious disease or injury must be admitted to a medical unit that can provide such care. In addition to these protections, the Geneva Convention for the Amelioration of the Condition of Wounded and Sick in Armed Forces in the Field (GWS) mandates any wounded and sick shall be collected and cared for, and furthermore encourages parties to search for the wounded and sick on the battlefield.

Military Activities - Activities intended primarily or exclusively for military operations as contrasted with activities intended primarily or exclusively for other purposes.

Military Nature - Term that applies to those items or those types of construction that are used exclusively by members of the Armed Forces for operational purposes (e.g., arms, helmets). The purposes are in contrast to items or structures that may be used either by civilian or military.

Parole - Parole is used in the international law sense of releasing a prisoner of war (PW) in return for a pledge not to bear arms.

Personal Effects - An EPW shall be allowed to retain personal effects. Personal effects the EPW may retain include the following:

- a. Clothing.
- b. Mess equipment (knives and forks excluded)
- c. Badges of rank and nationality.
- d. Decorations.
- e. Identification cards or tags.
- f. Religious literature.
- g. Articles that are of a personal use or have a sentimental value to the person.
- h. Protective mask.

Prisoner of War Information Center (PWIC) - A TOE organization established to collect information pertaining to EPW, RP and CI and to transmit such information to the National Prisoner of War Information Center.

Protection - Protection from violence, intimidation, insults, and public curiosity. This includes protection on the battlefield and intrusions from the press.

Relief Agency - A non-governmental agency such as the International Committee for the Red Cross or Doctors Without Borders.

Religious - EPW's shall have complete latitude in practicing their religious faith and may be attended to other EPW's.

Repatriation - Releasing an EPW back to his host nation. EPW must be repatriated as soon as hostilities end. However, the Detaining power cannot force an EPW to repatriate. Also, repatriation is required before cessation of hostilities for:

- a. Seriously sick and wounded EPWs whose recovery is expected to take more than 1 year (Art. 110, GPW); *
- b. Incurably sick and wounded (Art. 110, GPW); or *
- c. Permanently physically or mentally disabled (Art. 110, GPW)

* No sick or wounded EPW may be repatriated against his will.
** Retained personnel are to be repatriated as soon as they are no longer needed to care for the prisoners of war.

Reporting Requirements - The name, rank, date of birth, and service number. The detaining power has a duty to report, if available, the following additional information: father's first name, mother's maiden name, name and address of person to be notified, name of camp and postal address, information regarding transfers, releases, repatriations, escapes, admissions to hospitals, deaths, and information about the prisoner's state of health. Of these items, the only information that the prisoner is not under a duty to provide and may not be readily available to the detaining power is the information about the next of kin. If a prisoner is concerned for the safety of his or her family, the prisoner is not required to provide this information. GPW Article 122.

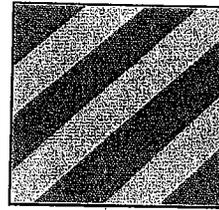
Retained Personnel - Enemy personnel who come within any of the categories below are eligible to be certified as retained personnel (RP).

- a. Medical personnel who are members of the medical service of their armed forces.
 - b. Medical personnel exclusively engaged in the—
 - (1) Search for, collection, transport, or treatment of, the wounded or sick.
 - (2) Prevention of disease.
 - (3) Staff administration of medical units and establishments exclusively.
 - c. Chaplains attached to enemy armed forces
 - d. Staff of National Red Cross societies and other voluntary aid societies duly recognized and authorized by their governments. The staffs of such societies must be subject to military laws and regulations.
 - e. Of note, retained status is not limited to doctors, nurse, corpsman, etc. It also includes, for example, the hospital clerks, cooks, and maintenance workers.
- * Retained personnel are to be repatriated as soon as they are no longer needed to care for the prisoners of war.

Shelter - EPWs may be interned only on land and afforded every guarantee of hygiene and healthfulness. Except in rare cases, they shall not be interned in penitentiaries. EPWs interned in unhealthy or dangerous areas shall be removed as soon as possible to a more favorable location.

FRONTLINE

Forward



Vol. 1 No. 13

Serving the Forward elements of the 3rd ID (M)

Feb. 26, 2003

3rd MPs round 'em up

Marne police train to tackle EPW issues

Spc. Katherine Robinson
50th PAD

On a cloudy Kuwaiti afternoon, a line of dirty, dejected looking prisoners wait on their knees, hands behind their heads, to be herded into trucks for transportation.



An EPW receives a numbered identification bracelet.

The guards keep a close eye and a rifle constantly trained on the prisoners as they load them in the truck and cart them off to be searched and searched again before finally receiving food, blankets, medical care and a place to sleep.

The 3rd Military Police Battalion conducted internment and resettlement training Feb. 17 and 18 in preparation for possible future operations.

See EPW, Page 8

Move out!

203rd FSB strives to keep up with division's war zone needs

Spc. Jacob Boyer
3ID (M) PAO

There are many things a task force of soldiers need to keep fighting – medical aid, vehicle maintenance and a multitude of other supplies.

If a task force moves quickly, its support needs to be able to keep up with its needs in a war zone.

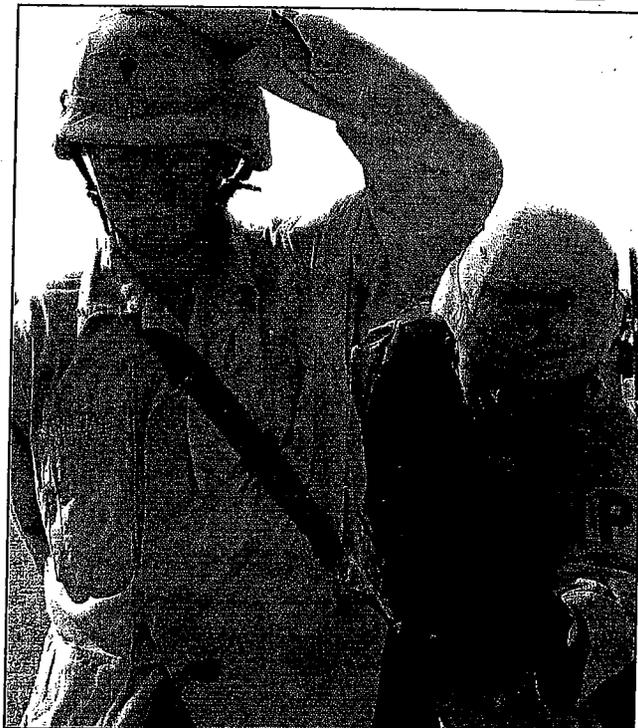
The 203rd Forward Support Battalion ensures the 3rd Brigade Combat Team gets all the support it needs when it is time to move out. The battalion held a field exercise Feb. 9-13 to make sure its soldiers were prepared to move the brigade support area rapidly if the brigade needs to move forward.

"Setting up and tearing down the BSA quickly is critical," said Maj. Jim

Stanford, operations officer, 203rd FSB. "The brigade moves fast, and this is the most lethal division in the world. If we can't keep up, then they come to a halt. They can't continue to fight."

The battalion consists of four companies. In addition to a headquarters element, there are three companies with

See FSB, Page 9



Photos by Spc. Katherine Robinson

Spc. Robert Bedford (right), a 3rd MP Bn. soldier from Winters, Texas, searches the bag of an "enemy prisoner of war," played by Spc. Dustin Davis, a fellow MP, from Wichita, Kan., during the battalion's internment and resettlement training Feb. 18 at Camp New York.

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EPW, from page 1

According to Master Sgt. Tony McGee, 3rd Infantry Division (Mech.) Provost Marshal operations sergeant, handling of enemy prisoners of war is one of the MPs main missions. "It consumes most of what we do," he explained.

The battalion set up a central collection point on Camp New York. The area was divided into several sections, exactly as they would be in a real-world situation, except on a significantly smaller scale, said McGee, a Florence, S.C., native.

The area included a central holding area, a segregated holding area divided by rank, a search area, inprocessing stations and barracks.

The MPs learned to transfer, maintain security, and account for prisoners, their belongings and their weapons.

If a war occurs, a large number of EPWs are expected, McGee said. "These guys' ability to handle that number and do it proficiently is extremely important. We've got to get (the prisoners) off the battlefield and protect them."

After a walk-through of the area and several briefings on the first day, the real training began on the Feb. 18. At forward collection points, the soldiers corralled prisoners, played by other MPs, searched them for weapons and took them to the central collection point in troop carriers.

The EPWs were searched again at the gate and moved into either the consolidated holding area or, if they needed medical attention, an aid station.

From there, another squad took the prisoners through inprocessing where they had their personal items inventoried and paperwork filled out. They re-



Spc. Katherine Robinson

A line of simulated enemy soldiers, played by MPs, sit waiting to be transported to the central collection point during the training.

ceived food, water and a blanket. They also received bracelets, with numbers that corresponded to their paperwork.

While some of their belongings were temporarily confiscated, the prisoners were allowed to keep badges of rank and nationality, religious literature and items of personal or sentimental nature.

Treating the EPWs correctly while handling them efficiently is very important, said Command Sgt. Maj. Charles D. Medley, 3rd MP Bn. command sergeant major, from Huntsville, Ala.

"One of the primary differences between the United States Army and many of our adversaries is that we treat EPWs with dignity and respect while maintain-

ing security," he said. Many enemy soldiers would rather be fed and housed by American MPs because they know they won't be mistreated, Medley added.

"We reinforce that with the MPs constantly," he said. "EPWs are soldiers, they're on the other side, but they're still human beings ... they will receive the same medical care as a U. S. Army soldier."

Sometimes enemy soldiers who surrender will cooperate because they're hungry and thirsty, said Pvt. 2 Ashley Hargett, an MP from Hutchinson, Kan. "I learned that some will resist and often that's because they're scared. You have to be aware of your surroundings."

Hargett said the training helped her know what to possibly expect.

"It's good training. It lets us know what we need to do and what we need to change," she said.

Though she's nervous about the prospect of having to put her training to use in a real-world situation, Hargett said she's not scared.

"I have a lot of confidence in my team," she said. "My team knows what they're doing. There's a lot of experience here."

The soldiers have the experience of many previous deployments to many different places, according to Medley, who said he shared Hargett's feelings of confidence.

"No other MP company in the United States has sent as many people to as many places (since Sept. 11, 2001) as the 3rd MP Battalion," he said.

"We're here to do a job, and when it's finished, we'll be glad to go home," he added. "I've had zero soldiers complain ... I couldn't be prouder."

DIVARTY, from page 7

on the same software, they can fire more accurately and communicate better.

Before the DIVARTY TOT, the units went through fire support rehearsals and technical rehearsals. The fire support rehearsal tested communications, observers and reviewed target orders. The tech-

nical rehearsal gave the crews a dry run where they tested commands, fire orders and targeting.

Should the division be called on for military action toward Iraq, mass fires may will be essential.

"You can kill more if you can mass

artillery," Williams said. "You're ability to mass artillery demonstrates your ability for violent fires on one area. The 3rd ID DIVARTY is prepared to execute the full spectrum of our missions, and DIVARTY will prosecute violently all missions requiring fire support."



DEPARTMENT OF THE ARMY
HEADQUARTERS 4TH INFANTRY DIVISION (MECHANIZED)
OFFICE OF THE STAFF JUDGE ADVOCATE
FORT HOOD, TX 76544-5000

REPLY TO
ATTENTION OF:

AFYB-JA-AL

26 July 2003

MEMORANDUM FOR Commander, 4th Infantry Division (Mechanized), Fort Hood, Texas 76544

SUBJECT: AR 15-6 Investigation – Legal Review

1. In accordance with AR 15-6, paragraph 2-3, I have reviewed the AR 15-6 investigation into the facts and circumstances surrounding the 22 July 2003 death of a prisoner held in the Division Central Collection Point. I make the following determinations:
 - a. The proceedings comply with the legal requirements.
 - b. Errors in the proceedings, if any, do not have a material adverse effect on any individual's substantial rights.
 - c. Sufficient evidence supports the findings.
 - d. The recommendations are consistent with the findings.
2. The investigation is legally sufficient.
3. The point of contact is the undersigned at (DNVT) 534- [REDACTED] (06-2)

[REDACTED SIGNATURE] (06-2)
[REDACTED]
CPT, JA
Administrative Law Attorney

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FOIA [REDACTED]

REPORT OF PROCEEDINGS BY INVESTIGATING OFFICER, BOARD OF OFFICERS

For use of this form, see AR 15-6; the proponent agency is OTJAG.

IF MORE SPACE IS REQUIRED IN FILLING OUT ANY PORTION OF THIS FORM, ATTACH ADDITIONAL SHEETS

SECTION I - APPOINTMENT

Appointed by MG RAYMOND ODIERNO
(Appointing authority)

on 22 JULY 03 (Date) (Attach inclosure 1: Letter of appointment or summary of oral appointment data.) (See para 3-15, AR 15-6.)

SECTION II - SESSIONS

The (investigation) (board) commenced at TIKRIT, IRAQ at 1200
(Place) (Time)

on _____ (Date) (If a formal board met for more than one session, check here . Indicate in an inclosure the time each session began and ended, the place, persons present and absent, and explanation of absences, if any.) The following persons (members, respondents, counsel) were present: (After each name, indicate capacity, e.g., President, Recorder, Member, Legal Advisor.)

The following persons (members, respondents, counsel) were absent: (Include brief explanation of each absence.) (See paras 5-2 and 5-8a, AR 15-6.)

(investigating officer) (board) finished gathering/hearing evidence at _____ on _____
(Time) (Date)

completed findings and recommendations at _____ on _____
(Time) (Date)

SECTION III - CHECKLIST FOR PROCEEDINGS

COMPLETE IN ALL CASES

	YES	NO ^{1/}	NA ^{2/}
Inclosures (para 3-15, AR 15-6)			
The following inclosed and numbered consecutively with Roman numerals: (Attached in order listed)			
Letter of appointment or a summary of oral appointment data?	X		
Copy of notice to respondent, if any? (See item 9, below)			X
Or correspondence with respondent or counsel, if any?			X
Other written communications to or from the appointing authority?			X
Cy Act Statements (Certificate, if statement provided orally)?	X		
Notification by the investigating officer or board of any unusual delays, difficulties, irregularities, or other problems encountered (e.g., absence of material witnesses)?			X
Notification as to sessions of a formal board not included on page 1 of this report?			X
Other significant papers (other than evidence) relating to administrative aspects of the investigation or board?	X		

^{1/} Explain all negative answers on an attached sheet.

^{2/} Use of the N/A column constitutes a positive representation that the circumstances described in the question did not occur in this investigation or board.

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		YES	NO ^{1/}	NA ^{2/}
2	Exhibits (para 3-16, AR 15-6)			
	a. Are all items offered (whether or not received) or considered as evidence individually numbered or lettered as exhibits and attached to this report?	X		
	b. Is an index of all exhibits offered to or considered by investigating officer or board attached before the first exhibit?	X		
	c. Has the testimony/statement of each witness been recorded verbatim or been reduced to written form and attached as an exhibit?	X		
	d. Are copies, descriptions, or depictions (if substituted for real or documentary evidence) properly authenticated and is the location of the original evidence indicated?	X		
	e. Are descriptions or diagrams included of locations visited by the investigating officer or board (para 3-6b, AR 15-6)?			X
	f. Is each written stipulation attached as an exhibit and is each oral stipulation either reduced to writing and made an exhibit or recorded in a verbatim record?	X		
	g. If official notice of any matter was taken over the objection of a respondent or counsel, is a statement of the matter of which official notice was taken attached as an exhibit (para 3-16d, AR 15-6)?			X
3	Was a quorum present when the board voted on findings and recommendations (paras 4-1 and 5-2b, AR 15-6)?			X
B. COMPLETE ONLY FOR FORMAL BOARD PROCEEDINGS (Chapter 5, AR 15-6)				
4	At the initial session, did the recorder read, or determine that all participants had read, the letter of appointment (para 5-3b, AR 15-6)?			
5	Was a quorum present at every session of the board (para 5-2b, AR 15-6)?			
6	Was each absence of any member properly excused (para 5-2a, AR 15-6)?			
7	Were members, witnesses, reporter, and interpreter sworn, if required (para 3-1, AR 15-6)?			
8	If any members who voted on findings or recommendations were not present when the board received some evidence, does the inclosure describe how they familiarized themselves with that evidence (para 5-2d, AR 15-6)?			
C. COMPLETE ONLY IF RESPONDENT WAS DESIGNATED (Section II, Chapter 5, AR 15-6)				
9	Notice to respondents (para 5-5, AR 15-6):			
	a. Is the method and date of delivery to the respondent indicated on each letter of notification?			
	b. Was the date of delivery at least five working days prior to the first session of the board?			
	c. Does each letter of notification indicate –			
	(1) the date, hour, and place of the first session of the board concerning that respondent?			
	(2) the matter to be investigated, including specific allegations against the respondent, if any?			
	(3) the respondent's rights with regard to counsel?			
	(4) the name and address of each witness expected to be called by the recorder?			
	(5) the respondent's rights to be present, present evidence, and call witnesses?			
	d. Was the respondent provided a copy of all unclassified documents in the case file?			
	e. If there were relevant classified materials, were the respondent and his counsel given access and an opportunity to examine them?			
10	If any respondent was designated after the proceedings began (or otherwise was absent during part of the proceedings):			
	a. Was he properly notified (para 5-5, AR 15-6)?			
	b. Was record of proceedings and evidence received in his absence made available for examination by him and his counsel (para 5-4c, AR 15-6)?			
11	Counsel (para 5-6, AR 15-6):			
	a. Was each respondent represented by counsel?			
	Name and business address of counsel:			
	(If counsel is a lawyer, check here <input type="checkbox"/>)			
	b. Was respondent's counsel present at all open sessions of the board relating to that respondent?			
	c. If military counsel was requested but not made available, is a copy (or, if oral, a summary) of the request and the action taken on it included in the report (para 5-6b, AR 15-6)?			
12	If the respondent challenged the legal advisor or any voting member for lack of impartiality (para 5-7, AR 15-6):			
	a. Was the challenge properly denied and by the appropriate officer?			
	b. Did each member successfully challenged cease to participate in the proceedings?			
13	Was the respondent given an opportunity to (para 5-8a, AR 15-6):			
	a. Be present with his counsel at all open sessions of the board which deal with any matter which concerns that respondent?			
	b. Examine and object to the introduction of real and documentary evidence, including written statements?			
	c. Object to the testimony of witnesses and cross-examine witnesses other than his own?			
	d. Call witnesses and otherwise introduce evidence?			
	e. Testify as a witness?			
	f. Make or have his counsel make a final statement or argument (para 5-9, AR 15-6)?			
14	If requested, did the recorder assist the respondent in obtaining evidence in possession of the Government and in arranging for the presence of witnesses (para 5-8b, AR 15-6)?			
15	Are all of the respondent's requests and objections which were denied indicated in the report of proceedings or in an inclosure or exhibit to it (para 5-11, AR 15-6)?			

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FOOTNOTES: ^{1/} Explain all negative answers on an attached sheet.
^{2/} Use of the N/A column constitutes a positive representation that the circumstances described in the question did not occur in this investigation or board.

SECTION IV - FINDINGS (para 3-10, AR 15-6)

The (investigating officer) (board), having carefully considered the evidence, finds:

FACTS:

Prisoner #1085 A.K.A. [redacted] died at approximately 0445D on 22 July 2003 at the TFCCP. According to multiple parties the deceased had been helped to the latrine for nausea by two other prisoners just prior to his death. After leaving the latrine, the deceased lost consciousness and was carried back to his tent. The prisoners then alerted [redacted] and [redacted] who checked on the prisoner. The prisoner was unconscious with what was felt to be a weak pulse. [redacted] [redacted] who instructed [redacted] to get a medic. [redacted] 4th MP [redacted], responded and did not feel a pulse. [redacted] senior medic, was notified and responded with [redacted] from the aid station. The prisoner was pronounced dead at 0545.

The deceased had been held at the DCCP since 27 June 2003. During this time he had sought medical attention from MP medics on multiple occasions. According to the MP daily log, the deceased had been seen on 02 July for chest pain. The deceased was taken to the aid station and eventually to the 28th CSH for treatment. The deceased was seen by a cardiologist at the 28th CSH and diagnosed with coronary artery disease, angina and type II diabetes. The prisoner was discharged back to the DCCP with medications. Prisoner #1087 stated that he had taken care of the deceased since his arrival at the DCCP. He further stated that the deceased had advanced coronary artery disease and had some sort of procedure done last year (presumably angioplasty since there was no chest scar indicating bypass surgery) and was allegedly scheduled to have a second procedure done in April of this year. The deceased had received his medications regularly during his stay in the DCCP. The deceased had also been seen on 03 July for vomiting, was treated and released by the MP medics, seen 16 July for passing out, treated and released by MP medics, and 19 July for dehydration, treated and released by MP medics. [redacted] stated that the deceased had not been feeling well for the last 4-5 days and had been feeling weaker and was unable to eat. The evening before his death, the deceased had complained of abdominal pain. [redacted] stated he told the guard, and the deceased was given an aspirin. Several MP's verified that the deceased had not been eating well for the past one to two weeks. The MP's also verified that the deceased had to have help going to the latrine during the last 2-3 days.

An autopsy was performed on the deceased by [redacted] province. The autopsy did not reveal any external or internal signs of trauma. The cause of death was listed as congestive heart failure. This was most likely secondary to a myocardial infarction (heart attack).

The MP medics are utilized for sick call and treating the EPW's within the DCCP, although this is not their primary responsibility. They have very limited assets for patient care. All EPW's with medical complaints are screened by MP Medics. The medics then decide who should be seen at the aid station or whether a higher medical personnel should be consulted.

EPW's are not screened for medical problems when they are placed in the DCCP and there was no medical record keeping prior to the death of this prisoner.

FINDINGS:

The deceased prisoner more than likely suffered a myocardial infarction and developed congestive heart failure which reached a critical point prior to his death. (C) The patient had a known history of coronary artery disease. (M, L) His last contact with the MP medics was on 19 July, 3 days prior, for dehydration. The prisoner also allegedly complained of abdominal pain with nausea and vomiting during the days preceding his death, which are symptoms consistent with his disease. (M) According to the autopsy report there was no evidence of foul play or traumatic injury. (C) The MP medics are ill suited to handle complex medical patients and provide sick call to the EPW's as well as carry out their primary mission of supporting the MP unit. (P)

SECTION V - RECOMMENDATIONS (para 3-11, AR 15-6)

In view of the above findings, the (investigating officer) (board) recommends:
There should be no disciplinary action taken against the MP medics or other.
The MP medics should not be used as the primary care giver for the EPW's. ✓
A physicians assistant or other higher medical authority should be assigned to provide sick call and medical care for the prisoners at the DCCP. This will allow the MP medics to accomplish their mission of providing medical support for their unit and remove them being the primary care giver of the EPW's.
If providing a Physicians assistant is not possible, a formal Standard operating procedure should be established for the MP medics to operate under in providing care for the EPW's with direct oversight by physicians assistant or other higher medical authority. In addition a system to identify complex medical patients, medical screening of patients and tracking of medical problems should be instituted for the DCCP. This would however place even more of a burden on the MP medics and keep them from accomplishing their primary mission of medical support for the MP unit.

SECTION VI - AUTHENTICATION (para 3-17, AR 15-6)

THIS REPORT OF PROCEEDINGS IS COMPLETE AND ACCURATE. (If any voting member or the recorder fails to sign here or in Section VII below, indicate the reason in the space where his signature should appear.)

b6-2



(Recorder)

(Investigating Officer) (President)

(Member)

(Member)

(Member)

(Member)

SECTION VII - MINORITY REPORT (para 3-13, AR 15-6)

To the extent indicated in Inclosure _____, the undersigned do(es) not concur in the findings and recommendations of the board. (In the inclosure, identify by number each finding and/or recommendation in which the dissenting member(s) do(es) not concur. State the reasons for disagreement. Additional/substitute findings and/or recommendations may be included in the inclosure.)

(Member)

(Member)

SECTION VIII - ACTION BY APPOINTING AUTHORITY (para 2-3, AR 15-6)

The findings and recommendations of the (investigating officer) (board) are (approved) (disapproved) (approved with following exceptions/ substitutions). (If the appointing authority returns the proceedings to the investigating officer or board for further proceedings or corrective action, attach that correspondence (or a summary, if oral) as a numbered inclosure.)

Raymond A. [Signature]

4 AUGUST 2003



DEPARTMENT OF THE ARMY
418TH CIVIL AFFAIRS BATTALION
4th ID (M) HHC G-5 UNIT # 92628
APO, AE. 09323-2628

[REDACTED]

b6-2
b7c-2

August 2, 2003

MEMORANDUM FOR: Staff Judge Advocate General

SUBJECT: Prisoner Death Investigation

b6-4, b7c-4

1. The inability of the prisoner [REDACTED] to receive nitroglycerin would not have precluded his imminent demise.

[REDACTED]

b6-2
b7c-2

Exhibit List
Investigation of Prisoner Death # [REDACTED] on 22 July 2003

b6-4
b7c-4

- A. Appointment letter
- B. MP Incident Report
- C. Autopsy Report
- D. [REDACTED] statement
- E. [REDACTED] statement
- F. [REDACTED] statement
- G. [REDACTED] statement
- H. [REDACTED] statement
- I. [REDACTED] statement
- J. [REDACTED] statement
- K. MD notice of death
- L. Medical record 02 July 03
- M. Prisoner #1087 statement
- N. Medication packets
- O. EPW Screening report
- P. Q and A with [REDACTED]



b6-4
b7c-4

b6-4
b7c-4



DEPARTMENT OF THE ARMY
HEADQUARTERS TASK FORCE IRONHORSE
TIKRIT, IRAQ

REPLY TO
ATTENTION OF

AFYB-CS

22 July 2003

MEMORANDUM FOR [REDACTED] b6-2

SUBJECT: Appointment of Investigating Officer

1. You are hereby appointed an investigating officer pursuant to AR 15-6 to conduct an informal investigation into the facts and circumstances surrounding the 22 July 2003 death of a prisoner held in the division's central collection point.
2. You will use informal procedures under AR 15-6, Chapter 4. You will make specific findings and recommendations on all relevant issues you identify in the course of your investigation. If, during your investigation, you suspect that persons you intend to interview may have violated any provision of the Uniform Code of Military Justice (UCMJ) or any other criminal law, you must advise them of their rights under the UCMJ, Article 31, or the Fifth Amendment, as appropriate. Rights warnings and waivers will be documented on DA Form 3881. Provide each witness a Privacy Act statement before you solicit any personal information. All witness statements will be sworn and recorded on DA Form 2823.
3. Prepare the report of proceedings on DA Form 1574 and submit the original to me within 72 hours of receipt of this memorandum. You must submit any requests for delay to me in writing. Include with your report all documentary evidence, sworn statements, and other information or evidence you considered.
4. Before proceeding with the investigation, contact [REDACTED] at [REDACTED] for an initial legal briefing. [REDACTED] will serve as your primary legal advisor. b6-2
5. If during the course of your investigation you discover systemic training, maintenance, and/or equipment design deficiencies that potentially caused or contributed to the incident under investigation, you will immediately contact your legal advisor for further guidance. b6-2

FOR THE COMMANDER:

[REDACTED] b6-2

6247

A

Type of Report: Initial

Date/time of report: 22 0815 JUL 03

Date/time of incident: 22 0515 JUL 03

Location of incident: LD 80132903 (TF IH CCP-Tikrit Main Palace)

Unit involved in the incident: 5th Platoon, 4th Military Police Company

Name of senior person involved in incident and contact information: [REDACTED]

b6-2/
b7c-2

Narrative of Incident: Enemy Prisoner of War Detainee #1085, [REDACTED] 60 year old local national had been detained in the TFCCP since 27 June, 2003. Individual was detained for possession of numerous weapons and a large quantity of ammunition. The detainee was seen by 4th MP Company medics approximately 3 times for health issues such as dehydration, his refusal to eat on numerous occasions, however there was no indication of any serious illness or injuries due to his stable vital signs during each checkup by 4th MP Medics. The individual was on multiple unknown medications upon his arrival to the TFCCP. At approximately 0500, the detainee was assisted by two other detainees (# [REDACTED] and # [REDACTED]) to utilize the latrine due to vomiting. On the way out of the latrine, the detainee collapsed and was carried back to the detainee tent by the two detainees, who stated to the 2 MP's [REDACTED] that the detainee was dead. The [REDACTED] of the outer portion of the camp [REDACTED] was notified, and he ordered [REDACTED] to go summon a medic from 4th MP HQ. [REDACTED] went into the cage and was informed by [REDACTED] and [REDACTED] that he had a low pulse. [REDACTED] checked for responsiveness and pulse and did not detect response or pulse. [REDACTED] Medic, 4th MP Company arrived on scene and verified that there was no pulse or signs of life, and [REDACTED] a Doctor at the Tikrit Main Palace TMC arrived and pronounced the detainee dead at 0540 hours.

b6-4/
b7c-4

b6-1/
b7c-1

b6-1/
b7c-1

b6-1/
b7c-1

b6-2/
b7c-2

b6-2/
b7c-2

Friendly Casualties: N/A

Enemy Casualties: N/A

EPWs: Deceased of unknown causes

What are the unit's future actions:

b6-1 b7c-1

POC name and contact information: [REDACTED] 4th MP Company at [REDACTED]

Satah Aldin Forensic medicine

Dissection Report



Name

age

60 years

b6-4
b7c-4

External examination:

Good built, gray hair, no any external trauma to different parts of the body.

Internal examination:-

Congestion and Oedema of all internal structures.

Heart :- weight 600 grams shows thickening of the walls and dilatation of heart chambers.

Lungs Congested and oedematous with multiple black stains and adhesions to pleura.

Liver small in size gray in colour with signs of fibrosis (cirrhosis)

Kidneys hypertrophy lobulated and each weight is 300 grams

Stomach contain small amount of digested food.

Conclusion:-

1. The cause of death is Congestive heart failure
2. No any internal trauma

b6-4
b7c-4

6249

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION TRAMIT, IAAQ	DATE 22 JUL 03	TIME	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]	GRADE/STATUS [REDACTED]	
ORGANIZATION OR ADDRESS [REDACTED]			

b6-4/
b7C-4/

b6-4/
b7C-4/

I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:
ON 22 JUL 03 AT APPROXIMATELY 0504 I WAS NOTIFIED BY

[REDACTED] THAT AN EPW (LATER IDENTIFIED AS # [REDACTED]) HAD
FALLEN OUT IN THE OUTSIDE CAGE. [REDACTED] AND I ENTERED
THE NORTHEAST CAGE AND APPROACHED THE FALLEN EPW BY WAY
OF [REDACTED] AND I WERE BRIEFED BY [REDACTED]
OF THE SITUATION AND WERE TOLD THE EPW STILL
HAD A PULSE BUT WAS LYING MOTIONLESS. [REDACTED]

b6-4/
b7C-4/

b6-4/
b7C-4/

HE FELT NOTHING. I THEN TOLD [REDACTED] AND INFORMED ME
MEDIC FROM HQ AND ORDERED THE REMAINING EPWS TO
GET OUT OF THE TENT AND INTO THE NORTHEAST TENT.
ONCE ALL EPWS WERE OUT OF THE TENT, I PLACED A
GUARD ON THE BODY AND NOTIFIED [REDACTED] IN OPS OF
THE SITUATION AND [REDACTED] THE PSQ. I WAS THEN INFORMED
THAT I WAS STILL CONDUCTING MY PT TEST THAT MORNING AND
DEPARTED THE A.O.

b6-4/

b6-2

b7C-2

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF [REDACTED] TAKEN AT [REDACTED] DATED [REDACTED] CONTINUED."
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED
AS "PAGE [REDACTED] OF [REDACTED] PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE
STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

DA FORM 2823, JUL 72

SUPERSEDES DA FORM 2823, 1 JAN 68, WHICH WILL BE USED.

USAPPC V2.00

6250

TASK FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

DATE: 24 JUL 03

b6-4 / b7C-4

I, [REDACTED], understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature

[REDACTED]

Name:

[REDACTED]

Rank:

[REDACTED]

Unit:

[REDACTED]

b6-4
b7C-4

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION DCCP Tiberit Trng	DATE 200306	TIME	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]		GRADE/STATUS [REDACTED]
ORGANIZATION OR ADDRESS [REDACTED]			

b6-1
b7C-1

b6-1
b7C-1

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 22 July 03, at 0500 [REDACTED] and I were doing latrine burning detail. When we noticed detainee [REDACTED] went into the latrine. When [REDACTED] detainee [REDACTED] # was done and left the detainee [REDACTED] collapsed. Other detainees moved detainee [REDACTED] to his tent. I then went to check on detainee [REDACTED] # I noticed a very faint pulse. [REDACTED] and noticed [REDACTED] detainee [REDACTED] went down. [REDACTED] then checked [REDACTED] detainee [REDACTED] went weak pulse also. When [REDACTED] detainee [REDACTED] noticed a detainee [REDACTED] pulse and noticed none. [REDACTED] told [REDACTED] to get the medic ([REDACTED]). I [REDACTED] then returned to my latrine burning detail.

b6-1 | b7C-1

b6-4 | b7C-4

b6-1
b7C-1

b6-4, b7C-4

b6-1
b7C-1

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 8 PAGES
<p>ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF [REDACTED] TAKEN AT [REDACTED] DATED [REDACTED] CONTINUED." THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE [REDACTED] OF [REDACTED] PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.</p>		

TASK FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

DATE:

I, _____, understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature

Name:

Rank:

Unit:

6253

STATEMENT OF _____ TAKEN AT _____ DATED _____

9. STATEMENT (Continued)

AFFIDAVIT

I HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE ____ I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

 B6-4/b7c-4
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this ____ day of _____ at _____

ORGANIZATION OR ADDRESS

(Signature of Person Administering Oath)

(Typed Name of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE OF PAGES

6255

TASK FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

DATE: 24/3/74

B6-4/ b7c-4

I, [REDACTED], understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

B6-4/b7c-4

Signature: [REDACTED]

Name: [REDACTED] B6-4/b7c-4

Rank: [REDACTED]

Unit: [REDACTED]

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

AUTHORITY:

Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).

PRINCIPAL

To provide commanders and law enforcement officials with means by which information may be accurately identified.

ROUTINE USES:

Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.

DISCLOSURE:

Disclosure of your social security number is voluntary.

1. LOCATION DECP TIKFIT FRAC	2. DATE (MM/YY/YY) 2005/07/22	3. TIME 1713 HRS	4. FILE NUMBER
5. LAST-NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS [REDACTED]			
9. [REDACTED]			

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On the date of 7/22/2005, at approximately [REDACTED] I observed a older male, dressed in dark gray clothing being carried from the restroom toilets by two other inmates. I followed in about 5 min. after the two inmates placed the male on his blanket, and I wondered as to why he was carried. [REDACTED] approached me and said I feel a pulse. I turned and went out to the guard tent and said that a inmate appears bad, find [REDACTED]. Upon my return [REDACTED] and I reentered the cage, and [REDACTED] stated that he would check pulse. The male appeared to not be breathing. I and other soldiers automatically began to move inmates away from the body. [REDACTED] stated that his eye did not close. Medic's arrived on scene, and medic. assistance began, myself and other soldier's began to pull

b7c-4

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 3 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF [REDACTED] TAKEN AT [REDACTED] DATED [REDACTED] THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED

B6-4/b7c-4

STATEMENT OF [REDACTED] TAKEN AT 1715 HRS DATED 07/24/2003

9. STATEMENT (Continued)

B6-4/b7c-4

AFFIDAVIT

I HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 3. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

B6-4/b7c-4

[REDACTED SIGNATURE]

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this _____ day of _____ at _____

ORGANIZATION OR ADDRESS

(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

[REDACTED]

B6-4/b7c-4

PAGE 3 OF 3 PAGES

TASK-FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

DATE: 07/24/2003

B6-4 | b7c-4

I, [REDACTED], understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature

Name:
Rank:
Unit:

[REDACTED SIGNATURE]
[REDACTED NAME]
[REDACTED RANK]
[REDACTED UNIT]

B6-4/
b7c-4

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION Tikrit Deep, IRAQ	DATE 22 Jul 03	TIME 0619	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]		GRADE/STATUS B6-4 b7c-4
ORGANIZATION OR ADDRESS [REDACTED]			

I, [REDACTED] B6-4 / b7c-4, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH: B6-4 / b7c-4

ON 22 July 03 At Approximately 0503 [REDACTED] informed me of a detainee with a low pulse. At that point He ordered me to push for a medic. I informed the medic. The medic came to scene and determined the [REDACTED] detainee had deceased.

B6-4
b7c-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED] B6-4 / b7c-4	PAGE 1 OF 2 PAGES
---------	--	-------------------

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF [REDACTED] TAKEN AT [REDACTED] DATED [REDACTED] CONTINUED."
 THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE [REDACTED] OF [REDACTED] PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.



TASK FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

DATE:

B6-4/ b7c-4

I, [REDACTED], understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature [REDACTED]

Name: [REDACTED]

Rank: [REDACTED]

Unit: [REDACTED]

} B6-4
b7c-4

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION 4 th MP BCCP	DATE 24 July 03	TIME 1215	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED] B6-4	SOCIAL SECURITY NUMBER [REDACTED] B6-4	GRADE/STATUS [REDACTED] B6-4	

ORGANIZATION OR ADDRESS
[REDACTED]

I, [REDACTED] B6-4, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 22 July 03, at 0510, I was awakened by [REDACTED] B6-4, stating they needed a medic at the EPW cage. I asked what was wrong and he told me the patient didn't have a pulse. I asked was he breathing he replied he didn't know and that he was just told to come get a medic. When I arrived at the EPW cage the patient, EPW # [REDACTED] B6-4, was covered with a blanket. I checked for a pulse and for breathing in which I found none. No one could tell me how long or when the EPW went down. I went and notified [REDACTED] B6-4 and [REDACTED] B6-4 from the aid station. We all proceeded to the EPW cage where [REDACTED] B6-4 performed his evaluation of the prisoner. [REDACTED] B6-4 pronounced him dead at 0545.

B7c-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED] B6-4	PAGE 1 OF 2 PAGES
---------	--	-------------------

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF _____ TAKEN AT _____ DATED _____ CONTINUED." THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE _____ OF _____ PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

6262 (F)

TASK FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

B6-4/b7c-4

DATE:

I, [REDACTED], understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature

Name

Rank

Unit

B6-4
b7c-4

6263

I

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSM).
PRINCIPAL: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION: DCCP Tikrit Iraq
2. DATE (YYYYMMDD): 2003 06 03
3. TIME: 03
4. FILE NUMBER:
5. LAST NAME, FIRST NAME, MIDDLE NAME: [REDACTED]
6. SSN: [REDACTED]
7. GRADE/STATUS: [REDACTED]
8. ORGANIZATION OR ADDRESS: [REDACTED]
9. [REDACTED]

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 22 July 03, at 0503 I was notified by [REDACTED] that detainee [REDACTED] had elapsed and had a weak pulse. I then told [REDACTED] to go get a medic from the Headquarters building and I went with [REDACTED] into the EPW holding cell and made contact with [REDACTED]. [REDACTED] also stated that [REDACTED] wasn't being responsive. I then checked [REDACTED] and he was not, and his eyes were half way shot. I then checked for a pulse [REDACTED] neck and did not get one. And I then felt that [REDACTED] was not alive. I then had [REDACTED] and myself separate the other detainees away from [REDACTED] and all other detainees were put into a separate tent. By this time [REDACTED] (Cmp [REDACTED]) had arrived and also checking for responsiveness and did not get any. [REDACTED] then went and got [REDACTED] and [REDACTED] left to go and notify operations of the situation. [REDACTED]

10. EXHIBIT:
11. INITIALS OF PERSON MAKING STATEMENT: [REDACTED]
PAGE 1 OF 3 PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF [REDACTED] TAKEN AT [REDACTED] DATED [REDACTED]"

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

570-5

36-4

6-4

J

B6-4/b7c-4

STATEMENT OF [REDACTED] TAKEN AT 22 July 03 DATED 22 July 03

9. STATEMENT (Continued)

Not Used

B6-4/b7c-4

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 3. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED] B6-4/b7c-4
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 22 day of July, 2003 at DCWP Jikni Itaq

ORGANIZATION OR ADDRESS

[REDACTED] B6-2
(Signature of Person Administering Oath)

(Typed Name of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE 3 OF 3 PAGES

6265 (J)

TASK FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

DATE:

B6-4/b7c-4

I, , understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature

Name:

Rank:

Unit:

 B6-4/b7c-4




MEDICAL RECORD

AUTHORIZED FOR LOCAL REPRODUCTION

CHRONOLOGICAL RECORD OF MEDICAL CARE

SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)

DATE

0545
21 July 63

BP:

PULSE:

97.7 TEMP:

RESP:

ALL:

MEDS:

PMHx

PSHx

TOB

EPOH

Patient seen and examined @ 0545.

S: Pt noted to be motionless on his back. Signs of resp. Non responsive to verbal stimuli.

O: No pulse noted. No pupillary reaction or response. No respirations or breath sounds on auscultation. No heart rate (OS, OS₂) and no abdominal signs or sounds noted. No muscle tone noted.

P: cool to the touch. Slight cyanosis in his lips & tips of digits.

A. Pt. no longer living. Time of death noted to be 0545.

P. Release to PNO for coordination with GI for removal of the corps.



B6-2/b7c-2

HOSPITAL OR MEDICAL FACILITY

SPONSOR'S NAME

STATUS

DEPART./SERVICE

RECORDS MAINTAINED AT

SSN/ID NO.

RELATIONSHIP TO SPONSOR

PATIENT'S IDENTIFICATION:

(For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)

REGISTER NO.

WARD NO.



B6-4/b7c-4

CHRONOLOGICAL RECORD OF MEDICAL CARE

Medical Record

STANDARD FORM 600

(REV. 6-97)

Prescribed by GSA/ICMR
FIRM (41 CFR) 201-9.202-1

USAPA V2.00

6207



Hx thru translator

MEDIC. CORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)

25 July 83 60 40 ♂ co chest pain (L side x 4 months
 BP: 140/93 R.T.S. Had operat from (R) Thigh to chest per
 PUL: 96 micro surgery x 4 month ago. -- Had surgery suggestion
 TEM: 98.5 of angioplasty; Pain described as burning sensation
 RESP: 14 worse when undistressed -- Not affected by food
 ALL: ⓪ in 7th d physical exerting 4503 of No-sea f
 7-D. 96/100 Resting P 85 Radiation Neck pain -- This pain
 MEI has been constant over past 4 months No recent
 deasbird change in Tg Sx; Pt indicator (C) Doctor Chest
 PMII: a- unmarked, NTP is noted
 1st episode YR Lungs - clear
 PSI: 5 note Chest - traumatic appearance; (R) TTB in sub
 TOI: ⓪ area; Heart RRR 5 (M)
 ETC: 'Abd - benign & epigastric TTB
 A: Chest pain doubt cardiac etiology; not urgent as
 no change in Sx over 4 months not worse on exertion &
 PPHX ⓪ Pt's vital signs are well
 P- To 28th C5H in an Dr. [redacted] / [redacted]
 Cardiologist
 B6-4
 b7c-4

HOSPITAL	FACILITY	STATUS	DEPARTMENT/SERVICE	RECORDS MAINTAINED AT
SPONSOR	SSN/ID NO.	RELATIONSHIP TO SPONSOR	REGISTER NO.	WARD NO.

MEDICAL RECORD	EMERGENCY CARE AND TREATMENT (Doctor)	TIME SEEN BY PROVIDER
----------------	--	-----------------------

TEST RESULTS										
CBC	WBC	SMAC	ABG/PULSE OX					RADIOLOGY	Check if read by radiologist <input type="checkbox"/>	
	H/H		SUP O2	PH	PO2		RESULTS			
	PLT		PCO2	SAT	OTHER					
PT			DIP	EKG INTERPRETATION						
APTT			U/A							MICRO
BHC			ETOH	GLU						

PROVIDER HISTORY/PHYSICAL

yo Arabic male % chest pain - CONTINUOUS -

60 yo Arabic male with chest pain - CONTINUOUS -
No cp currently while @ rest. @ SOB @ diaphoretic.

Asym, MAD, dry mucous membranes

Lungs - clear Heart - RRR S₁ @ Edema @ edema.

① Still crying - off med,

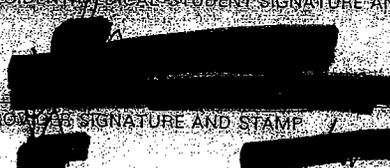
135 / 4.3 | 127/6 | 1.1

CXR - MAD
EKG - Qr V₁+V₂
ST Δ V₅-V₆
@ acute Δ

Qr all leads per cards
hydration @ JVP @ po
Card @ small
Alv 1-2 wk.

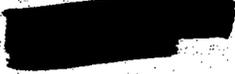
PMHx:
Diabetes
HTN
PSHx: ? Cardiac
MI

CONSULT WITH	TIME	ACTION

RESIDENT PHYSICAL STUDENT SIGNATURE AND STAMP
 } B6-41
 PROVIDER SIGNATURE AND STAMP
 } b7c-4

DIAGNOSIS:
as above

PATIENT'S IDENTIFICATION (For typed or written entries, give: Name - last, first, middle; ID no. (SSN or other); hospital or medical facility)

EPW  B6-41
b7c-4

EMERGENCY CARE AND TREATMENT (Doctor)
Medical Record

STANDARD FORM 558 (REV. 9-96)
Prescribed by GSA/CMR
FPMR (41 CFR) 101-11.203(b)(10)
USARA V1.00

b7c-4

Ward/Section: EMT REQUESTING PHYSICIAN: [REDACTED] BG-4 LABORATORY RESULT FORM
 (Subject to the Privacy Act of 1974)
 LAST, FIRST, MI. EPW [REDACTED] BG-4 DATE 3 July TIME 1300 SSNPSEUDO SSN: [REDACTED] BG-4

Hematology (CBC)			Urinalysis			Misc. Serology		
TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE
WBC		4.8-10.8 x 10 ³	Color		N/A	RPR		Negative
RBC		4.7-6.1 x 10 ³	App		N/A	Mono		Negative
Hgb		14-18 g/dl (M) 12-16 g/dl (F)	Glu		Negative	Microbiology		
Hct		42-52% (M) 37-47% (F)	Bili		Negative	Source		
MCV		80-94 fl (M) 81-99 fl (F)	Ket		Negative	Gram Stain		
Plt		130-500 x 10 ³ verified	SG		N/A	Occ Bld		Negative
Lymph %		20.5-51.1%	Bld		Negative	H. pylori		Negative
Hematology Manual Differential			pH		N/A	Micro Parasites		
Segs		Mono	Prot		Negative	Malaria		
Bands		Eos	Urob		0.2-1.0	O & P		
Lymph		Baso	Nit		Negative	Other		
Atyp		Imm	Leuk		Negative	Microscopic Urinalysis		
RBC Morph			HCG		Negative			
Spun Hematocrit		42-52% (M) 37-47% (F)	BSP			Blood Culture		
Sed Rate			Cell Count			MUST SUBMIT SLAB WITH EVERY UNIT REQUESTED		
Other			Directigen		Negative	ABO/Rh		

Coagulation Studies

TEST	RESULT	REF. RANGE	UNIT	TYPE	CROSSMATCH
PT		9.8-13.6 secs			
APTT		21-34 secs			
D dimer		<20 ug/ml			
FDP		<10 ug/ml			

REMARKS:

REPORTED BY: _____ DATE: _____ LAB ID NO.: _____

6270

TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE
Na		138-146 mmol/L	ALB		3.5-5.5 g/dl	GLU		73-118 mg/dl
K		3.5-4.9 mmol/L	ALP		26-84 u/l	BUN		7-22 mg/dl
Cl		98-109 mmol/L	ALT		10-47 u/l	CA ⁺⁺		8.0-10.3 mg/dl
pH		7.31-7.45	AMY		14-97 u/l	CRE		0.6-1.2 mg/dl
PCO2		35-45 mmHg (art) 41-51 mmHg (ven)	AST		11-38 u/l	NA ⁺		128-145 mmol/l
PO2		80-105 mmHg (art) N/A (ven)	TBIL		0.2-1.6 mg/dl	K ⁺		3.5-5.0 mmol/l
TCO2		23-27 mmol/L (art) 24-29 mmol/L (ven)	BUN		7-22 mg/dl	CL ⁻		98-108 mmol/l
HCO3		22-26 mmol/L (art) 23-28 mmol/L (ven)	CA ⁺⁺		8.0-10.3 mg/dl	tCO ₂		18-33 mmol/l
sO2		95-98%	CHOL		100-200 mg/dl			
BEecf		(-2) - (+3) mmol/L	CRE		0.6-1.2 mg/dl			
AnGap		10-20 mmol/L	GLU		73-118 mg/dl	TEST	RESULT	REF. RANGE
Ca		1.12-1.32 mmol/L	TP		6.4-8.1 g/dl	ALB		3.5-5.5 g/dl
BUN		8-26 mg/dl				ALP		26-84 u/l
GLU		70-105 mg/dl				ALT		10-47 u/l
Creat		0.7-1.5 mg/dl	TEST	RESULT	REF. RANGE	AMY		14-97 u/l
Hc		98-51% PCV	GLU	276	73-118 mg/dl	AST		11-38 u/l
Hgb		12-17 g/dl	BUN	28	7-22 mg/dl	TBIL		0.2-1.6 mg/dl
			CRE	11	0.6-1.2 mg/dl	GGT		3-65 u/l
			CK	60	39-380 u/l (M) 30-190 u/l (F)	TP		6.4-8.1 g/dl
			NA ⁺	135	128-145 mmol/l			
			K ⁺	4.3	3.5-5.0 mmol/l	TEST	RESULT	REF. RANGE
			CL ⁻	98	98-108 mmol/l	NA ⁺		128-145 mmol/l
			tCO ₂	22	18-33 mmol/l	K ⁺		3.5-5.0 mmol/l
						CL ⁻		98-108 mmol/l
						tCO ₂		18-33 mmol/l

No KOP
du

EMARKS:

REPORTED BY: _____ DATE: _____ LAB ID NO.: _____

MEDICAL RECORD	EMERGENCY CARE AND TREATMENT (Patient)	LOG NUMBER	TREATMENT FACILITY
		RECORDS MAINTAINED AT	

PATIENT'S HOME ADDRESS OR DUTY STATION		ARRIVAL	
STREET ADDRESS		DATE (Day, Month, Year)	TIME
CITY		354103	1235
STATE	ZIP CODE	TRANSPORTATION TO FACILITY	

SEX M	DUTY/LOCAL PHONE		MILITARY STATUS			THIRD PARTY INSURANCE			
	AREA CODE	NUMBER	ITEM	YES	NO	N/A	ITEM	YES	NO
AGE 60	HOME PHONE		PRP				ADDITIONAL INSURANCE		
	AREA CODE	NUMBER	FLYING STATUS				DD 2568 IN CHART		
CURRENT MEDICATIONS LATEAM 24 pills/d			MEDICAL HISTORY OBTAINED FROM Translator			NAME OF INSURANCE COMPANY			

ALLERGIES NKDA	INJURY OR OCCUPATIONAL ILLNESS			EMERGENCY ROOM VISIT		
	ITEM	YES	NO	WHEN (Date)	DATE LAST VISIT	24 HOUR RETURN <input type="checkbox"/> YES <input type="checkbox"/> NO
CHIEF COMPLAINT Engine on D side x 4 mths @ 1419	IS THIS AN INJURY?		WHERE		TETANUS	
	INJURY/SAFETY FORMS		HOW		DATE LAST SHOT	COMPLETED INITIAL SERIES <input type="checkbox"/> YES <input type="checkbox"/> NO

CATEGORY OF TREATMENT		VITAL SIGNS					
<input checked="" type="checkbox"/> EMERGENT	TIME 1230	TIME 1250	1419	1450			
<input type="checkbox"/> URGENT	INITIALS	BP 150/80	139/67	125/65			
<input type="checkbox"/> NON-URGENT		PULSE 97	98	85			
		RESP 18	18	16			
		TEMP 97		97.2			
		WT 75 kg					

LAB ORDER	<input checked="" type="checkbox"/> CBC/DIFF	ABG	PT/PTT	BHCG/URINE/BLOOD/QUANT	CXR PA & LAT/PORTABLE	C-SPINE
	<input type="checkbox"/> URINE C/S	UA MSCC/CATH		CREM	ACUTE ABDOMEN	LS-SPINE
	<input type="checkbox"/> BLOOD C/S X		<input checked="" type="checkbox"/> METS		SINUS	HEAD CT
	<input checked="" type="checkbox"/> Urine protein				ANKLE R/L	

ORDERS		<input checked="" type="checkbox"/> MONITOR	<input checked="" type="checkbox"/> LOG
TIME	ORDERS	BY	COMPLETED BY
10:00	OK and DS	gd	
1600		gd	
1800		gd	
			PATIENT'S RESPONSE

DISPOSITION	DISPOSITION QUARTERS / OFF DUTY	PATIENT/DISCHARGE INSTRUCTIONS	
<input type="checkbox"/> HOME <input type="checkbox"/> FULL DUTY	<input type="checkbox"/> 24 HRS. <input type="checkbox"/> 48 HRS. <input type="checkbox"/> 72 HRS.		
MODIFIED DUTY UNTIL	RETURN TO DUTY		

CONDITION UPON RELEASE	ADMIT TO UNIT/SERVICE	REFERRED	TO	WHEN
<input type="checkbox"/> IMPROVED <input type="checkbox"/> UNCHANGED		<input checked="" type="checkbox"/>		
<input type="checkbox"/> DETERIORATED	TIME OF RELEASE	I have received and understand these instructions.		
PATIENT'S SIGNATURE				

PATIENT'S IDENTIFICATION (For typed or written entries, give: Name - last, first, middle; ID no., (ISSN or other), hospital or medical facility)

0024

[Redacted]

B6-4/
b7c-4

MEDICAL RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
03 JUL 03 1330	<p><i>Cardiology Hx via interp.</i></p> <p>60 YM sent for evaluation of angina. Has known H/O ASCAD (unknown anatomy but had cath + intervention 3 mos ago in Baghdad) and has SSCP for few days since stopping meds. Daily episodes - especially in mornings. Prior to that - sx's were controlled.</p> <p>No current pain.</p> <p>Meds: ASA, ACET, SL-NTG - 2 others not known</p> <p>PMH: ASCAD, DMII</p> <p>S/Hx: In custody ~ 10 days.</p> <p>of 150/80, 94, 16, 95% RA - appears well</p> <p>lungs w/ very mild wheezing at base, NL CVR, NL S/S, 85% (circled)</p> <p>soft abd, & edema</p> <p>EKG: NSR, septal MI - a.u. No ST-T NO prior</p> <p>CX 60, CXR - acute pathology. Bowler 28/11</p> <p>echo: poor quality - LV fun grossly NL - cannot R/O RWAA.</p> <p>Imp: 1) ASCAD - angina based on being off meds. No MI by Hx/EKG.</p> <p>- Restart meds: ASA 325 qd, aspirin 25 mg qd, lisinopril 10 mg qd, SL NTG prn, glipizide 5 mg po qd</p> <p>- F/U in 1 wk if sx's not improved.</p>

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	REGISTRATION
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	[REDACTED]
PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN, Sex, Date of Birth; Rank/Grade.)		REGISTER NO.	WARD NO.

bb-4
b7c-4

opw

B6-4

ID.

B6-4

3-May-1997 4:03:13

28th COMBAT SUPPORT HOSPITAL

60years
Male

Asian
160lbs

vent rate 91 bpm
PR interval 160 ms
QRS duration 96 ms
QT/QTc 348/428 ms
P-R-T axes 73 -17 71

Normal sinus rhythm
Septal infarct, age undetermined
Abnormal ECG

MISSVT

Technician: lt smith
Test ind: chest pain

Meds: ?

No prior.

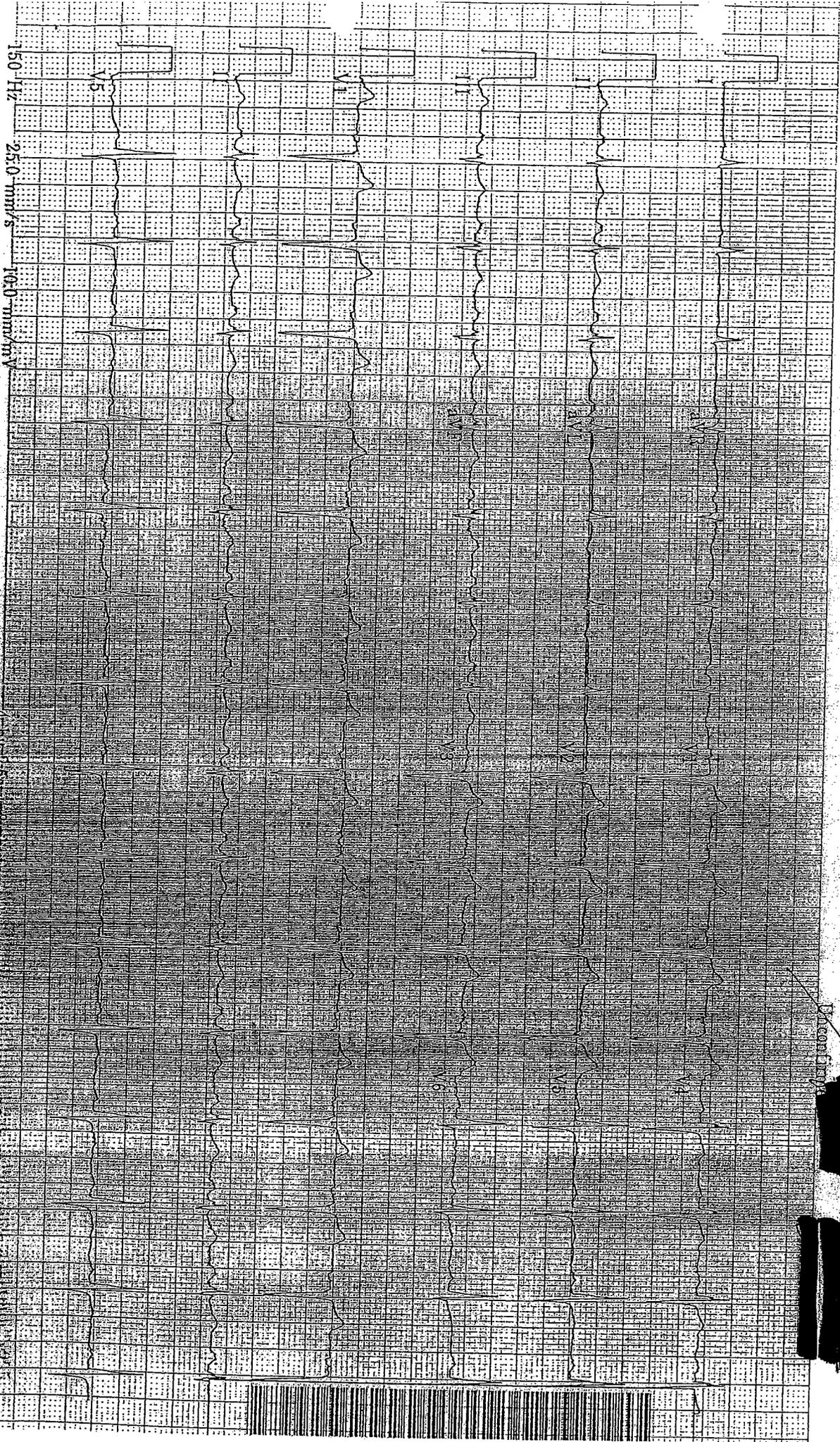
Recon Dr. [redacted]

[redacted]

[redacted]

B6-4/b7c4

6274



b6-4, b7c-4

RADIOLOGIC CONSULTATION REQUEST/REPORT

(Radiology/Nuclear Medicine/Ultrasound/Computed Tomography Examinations)

EXAMINATION(S) REQUESTED

CXR

AGE	SEX	SSN (Sponsor)	WARD/CLINIC	REGISTER NO.
60	M	EPW [REDACTED]	ACC	
FILM NO.				PREGNANT
				<input type="checkbox"/> YES <input type="checkbox"/> NO
REQUESTED BY (Print)				TELEPHONE/PAGE NO.
Referral from Palace				
SIGNATURE OF REQUESTOR				DATE REQUESTED
				3 July 83

SPECIFIC REASON(S) FOR REQUEST (Complaints and findings)

Chest pain

DATE OF EXAMINATION (Month, day, year)	DATE OF REPORT (Month, day, year)	DATE OF TRANSCRIPTION (Month, day, year)
7/3/83		

RADIOLOGIC REPORT

PATIENT'S IDENTIFICATION (For typed or written entries give: name - last, first, middle, Medical Facility)

EPW [REDACTED] B6-4
b7c-4

LOCATION OF MEDICAL RECORDS
LOCATION OF RADIOLOGIC FACILITY
SIGNATURE

STATEMENT OF PRISONER # [REDACTED]
23 JULY 2003

b6-4
b7c-4

This interview was conducted with the use of an interpreter.

Prisoner [REDACTED] was interviewed regarding circumstances surrounding the death of prisoner [REDACTED]

The two prisoners slept next to each other, prisoner [REDACTED] stated that he had been "taking care" of [REDACTED] for the past 25 days since they were both moved up to the Division Detainee Collection Point (DCCP) from Diyala province. Prisoner [REDACTED] stated that [REDACTED] had told him that he was diagnosed approximately 4 years ago with "6 arteries blocked in his heart". [REDACTED] further stated that he had a procedure done in Baghdad last year to open some of the arteries and was to have another procedure performed in April of this year.

Prisoner [REDACTED] stated that when [REDACTED] was originally processed into the DCCP he was able to walk on his own and perform most daily living functions. [REDACTED] stated that [REDACTED] had complained of chest pains in the past and was taken by the medics to a hospital (he stated that it was the Tikrit Hospital, however it was really the 28th CSH). [REDACTED] stated that he had received some medicines from the hospital but did not have any return visits.

[REDACTED] stated that in the last 3-4 days [REDACTED] was feeling worse, was unable to eat because of abdominal pain, nausea and vomiting. [REDACTED] also complained of chest pain for the last couple of days, he was unsure if he had told the MP [REDACTED] of his chest pain.

The night before his death, unknown time, [REDACTED] stated that [REDACTED] had expressed a "feeling like he was going to die". [REDACTED] stated that he had informed the medics of [REDACTED] complaints and the medics gave him an aspirin. [REDACTED] stated that he requested the medication "placed under his tongue" (presumably nitroglycerin) but was told by the medics that they did not have any. At approximately 0500 [REDACTED] was helped to the restroom by some of the other detainees and was complaining of abdominal pain. [REDACTED] apparently collapsed after being assisted from the latrine and was carried back to his tent. [REDACTED] stated that he immediately informed the MP's and they responded with medical personnel.

b7c-4

b6-4
b7c-4

6270

DETAINEE DISPOSITION WORKSHEET

MP#: [REDACTED]

DETAINEE NAME: [REDACTED]

CONFINEMENT DATE: 27 JUNE 2003

b6-4
b7c-4

STAFF RECOMMENDATION: 23

G2 [REDACTED] B6-4

G3 [REDACTED] B6-4 Infantry

PMC [REDACTED] B6-4

SIA [REDACTED] B6-4 / B5-3

b7c-4

RELEASE DETAIN TRANSPORT TO CHA
[REDACTED] B6-4

COMMENTS: _____

[REDACTED]

B6-4
b7c-4

INCIDENT REPORT FORM

Type of Report: Initial

Date/time of report: 22 0815 JUL 03

Date/time of incident: 22 0515 JUL 03

Location of incident: LD 80132903 (TF IH CCP Tikrit Main Palace)

Unit involved in the incident: 5th Platoon, 4th Military Police Company

Name of senior person involved in incident and contact information: [REDACTED]

[REDACTED] B6-4

Narrative of Incident: Enemy Prisoner of War Detainee [REDACTED] 60 year old local national had been detained in the TFCCP since 27 June, 2003. Individual was detained for possession of numerous weapons and a large quantity of ammunition. The detainee was seen by 4th MP Company medics approximately 3 times for health issues such as dehydration, his refusal to eat on numerous occasions, however there was no indication of any serious illness or injuries due to his stable vital signs during each checkup by 4th MP Medics. The individual was on multiple unknown medications upon his arrival to the TFCCP. At approximately 0400 the detainee was assisted by two other detainees ([REDACTED] and [REDACTED]) to utilize the latrine due to stomach pain. The detainee completed utilizing the latrine and was carried back to the detainee tent by the two detainees. Approximately 0500 the two detainees ([REDACTED] and [REDACTED]) sought the nearest Military Policemen and stated to the 2 MP's ([REDACTED] and [REDACTED]) that the detainee was dead. The [REDACTED] of the outer portion of the camp ([REDACTED]) was notified, and he ordered [REDACTED] to go summon a medic from 4th MP HQ. [REDACTED] went into the cage and was informed by [REDACTED] and [REDACTED] he had a low pulse. [REDACTED] checked for responsiveness and pulse and did not detect response or pulse. [REDACTED] 4th MP Company arrived on scene and verified that there was no pulse or signs of life, and [REDACTED] a Doctor at the Tikrit Main Palace TMC arrived and pronounced the detainee dead at 0540 hours.

Friendly Casualties: N/A

Enemy Casualties: N/A

EPWs: Deceased of unknown causes

What are the unit's future actions:

POC name and contact information: [REDACTED]
Company at DNVT [REDACTED]

} B6-4
b7c-4

<input type="checkbox"/> Arson (I.P.C. 342)	<input type="checkbox"/> Burglary or Housebreaking (I.P.C. 428)
<input type="checkbox"/> Solicitation of Fornication/Prostitution (I.P.C. 399)	<input type="checkbox"/> Extortion/Communicating Threats (I.P.C. 430)
<input type="checkbox"/> Rape/Indecent/Sexual Assaults/Acts (I.P.C. 393-98; 402)	<input type="checkbox"/> Theft (I.P.C. 439)
<input type="checkbox"/> Murder (I.P.C. 405)	<input type="checkbox"/> Destruction of Property (I.P.C. 477)
<input type="checkbox"/> Aggravated Assault/Assault With Intent To Kill (I.P.C. 410)	<input type="checkbox"/> Obstructing a Public Highway/Place (I.P.C. 487)
<input type="checkbox"/> Maiming (I.P.C. 412)	<input type="checkbox"/> Discharging Firearm/Explosive in City/Town/Village (I.P.C. 495)
<input type="checkbox"/> Simple Assault (I.P.C. 415)	<input type="checkbox"/> Riot or Breach of Peace (I.P.C. 495(3))
<input type="checkbox"/> Kidnapping (I.P.C. 421)	<input type="checkbox"/> Other

Offense against Coalition Forces [check one] if "Other" then describe: Area Trespassing

<input type="checkbox"/> Violation of Curfew	<input type="checkbox"/> Trespass on Military Installation or Facility
<input checked="" type="checkbox"/> Illegal Possession of Weapon	<input type="checkbox"/> Photographing/Surveillance Military Installation or Facility
<input type="checkbox"/> Assault/Attack on Coalition Forces	<input type="checkbox"/> Obstructing Performance of Military Mission
<input type="checkbox"/> Theft of Coalition Force Property	<input checked="" type="checkbox"/> Other

Apprehending Unit: 588 En Bn Location: NC 67213473

Date of Incident (D/M/Y): 23/06/03 Time of Incident: 0110 hrs to Date of Report (D/M/Y): 1/1 Time of Report: hrs

Detainee # <u>[Redacted]</u>		Key Connected Person: <input type="checkbox"/> Victim <input type="checkbox"/> Witness <input type="checkbox"/>	
Last Name: <u>[Redacted]</u>		Last Name: _____	
First Name: <u>[Redacted]</u>		First Name: _____	
Hair Color: _____		Hair Color: _____	
Scars/Tattoos/Deformities: _____		Scars/Tattoos/Deformities: _____	
Eye Color: _____	Weight: _____ lb	Eye Color: _____	Weight: _____ lb
Address: _____	Height: _____ in	Address: _____	Height: _____ in
Place of Birth: _____		Place of Birth: _____	
Ethnicity/Tribe/Sect: _____	Sex: <input type="checkbox"/> M <input type="checkbox"/> F	DOB D/M/Y: _____	Phone #: _____
Mobile: <input type="checkbox"/> Regular <input type="checkbox"/>		Mobile: <input type="checkbox"/> Regular <input type="checkbox"/>	
<input type="checkbox"/> Passport	<input type="checkbox"/> Dr. license	<input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Passport
Document # _____	Document # _____		<input type="checkbox"/> Dr. license
Document # _____		<input type="checkbox"/> Other (specify) _____	

Total Number of Persons Involved: 1 (list names/identifying info on reverse under "Additional Helpful Information")

Vehicle Information: Vehicle Number _____ of _____ Vehicle(s) _____ Owner _____

Make _____ Color _____ VIN _____

Model _____ Type _____ Plate No. _____

Year _____ Names of People in Vehicle _____ Number of People in Vehicle _____

Contraband/Weapons in Vehicle: Property/Contraband Weapon

Type: _____ Photo Taken of Suspect with Weapon/Contraband: Yes/No _____

Serial No.: _____ Model: _____

Quantity: _____ Make: _____ Color/Caliber: _____

Other Details: _____ Where Found: _____ Receipt Provided to Owner: Yes/No _____

Name of Assisting Interpreter: _____ Owner: _____

Detaining Soldier's Name (Print): [Redacted] Email/Phone/Contact Info: B6-4

Signature: [Redacted] Supervising Officer's Name (Print): [Redacted]

Email: [Redacted] Signature: [Redacted]

Unit Phone: _____ Email: [Redacted]

Date: 06/123/03 Unit Phone: _____ Date: 06/123/03

36-4

67c-4

COALITION PROVISIONAL AUTHORITY FORCES APPREHENSION FORM

Why was this person detained? *He was functioning as a middle man in an arms trafficking ring*

Who witnessed this person being detained or the reason for detention? Give names, contact numbers, addresses.
B/558

How was this person traveling (car, bus, on foot)?

Who was with this person?

What weapons was this person carrying? *2x 9mm boxes of 162 linked, AK mag, Tek 9 mag, 162 round x 200, 9mm ammo box, 20, 2 bayonets,*

What contraband was this person carrying?

What other weapons were seized?

What other information did you get from this person?

Additional Helpful Information:



DEPARTMENT OF THE ARMY
HEADQUARTERS 4TH INFANTRY DIVISION (MECHANIZED)
OFFICE OF THE STAFF JUDGE ADVOCATE
TIKRIT, IRAQ

REPLY TO
ATTENTION OF:

AFYB-JA-AL

07 September 2003

MEMORANDUM FOR Commander, 4th Infantry Division (Mechanized), FOB Ironhorse, Tikrit, Iraq

SUBJECT: AR 15-6 Investigation – Legal Review

1. In accordance with AR 15-6, paragraph 2-3, I have reviewed the AR 15-6 investigation into the 13 August 03 death of a detainee at Camp Warhorse. I make the following determinations:
 - a. The proceedings comply with the legal requirements.
 - b. Errors in the proceedings, if any, do not have a material adverse effect on any individual's substantial rights.
 - c. Sufficient evidence supports the findings.
 - d. The recommendations are consistent with the findings.
2. The investigation is legally sufficient.
3. The point of contact is the undersigned at (DNVT) 534 [REDACTED]

b6-2

b6-2

b7C-2

[REDACTED]
CPT, JA
Administrative Law Attorney

INDEX OF ENCLOSURES AND EXHIBITS

ENCLOSURES:

- I - Appointment Orders
- II - Rights Warning Certificate - [REDACTED]
- III - Rights Warning Certificate - [REDACTED]
- IV - Rights Warning Certificate - [REDACTED]
- V - Rights Warning Certificate - [REDACTED]
- VI - Rights Warning Certificate - [REDACTED]
- VII - Rights Warning Certificate - [REDACTED]
- VIII - Rights Warning Certificate - [REDACTED]
- IX - Rights Warning Certificate - [REDACTED]
- X - Rights Warning Certificate - [REDACTED]

b6-4/5
b7c-4/5

EXHIBITS:

- A. Coalition Authority Forces Apprehension Form
- B. Sworn Statement, [REDACTED], dated 14 Aug 03
- C. Sworn Statement, [REDACTED], dated 15 Aug 03
- D. Sworn Statement, [REDACTED], dated 16 Aug 03
- E. Sworn Statement, [REDACTED], dated 16 Aug 03
- F. Sworn Statement, [REDACTED], dated 16 Aug 03
- G. Sworn Statement, [REDACTED], dated 16 Aug 03
- H. Sworn Statement, [REDACTED], dated 16 Aug 03
- I. Sworn Statement, [REDACTED], dated 16 Aug 03
- J. Sworn Statement, [REDACTED], dated 16 Aug 03
- K. Sworn Statement, [REDACTED], dated 16 Aug 03
- L. Chronological Record of Medical Care.

b6-4/5
b7c-4/5

DEPARTMENT OF THE ARMY
C CO, 64 FORWARD SUPPORT BATTALION
3 BRIGADE COMBAT TEAM, 4 INFANTRY DIVISION (M)
BALAD, IRAQ AP0-AE 09323

AECZ-FC-C

24 August 2003

MEMORANDUM FOR Commander, Task Force Ironhorse, ATTN: Chief of Staff,
Headquarters, Task Force Ironhorse, Tikrit, Iraq

SUBJECT: Findings and Recommendations of Informal Investigation of death of Iraqi
detainee [REDACTED]

1. FINDINGS

a. On 13 August 2003, Iraqi detainee [REDACTED] was declared dead due to
cardiopulmonary arrest by [REDACTED], 2 BCT. The ailment(s)
and medical conditions that led to the cardiopulmonary arrest are unknown as no autopsy
was performed.

b6-2/7c-2

b. Detainee [REDACTED] was a 56-year-old male that was apprehended on 3 August
2003. He was brought to the detainee center at Camp Warhorse on the same day and
Coalition Provisional Authority Forces Apprehension Form was completed. The 4th MP
Co and E Co 204th FSB report that each new detainee undergoes a medical screening
within 24 hours of arriving at the camp which includes listing chronic medications, a
brief physical examination, and treating any significant injuries/ailments. The medical
information is placed in the detainee's file. "Sick call" is provided daily by E Co 204
FSB and all detainees have access to this service. "Sick call" encounters were not
documented until 11 August 2003 when [REDACTED] required written documentation to
be performed. Detainee [REDACTED] had no documentation of a medical screening or "sick
call" encounters in his file.

b6-2/7c-2

c. [REDACTED] reports that detainee [REDACTED] complained of being hot on the
evening of 12 August 2003 and was let out of his cell to cool down. The detainee was
given water to drink and water was poured on him by [REDACTED]. The detainee was
placed back into his cell due to mortar fire and [REDACTED] heard nothing more from him
that evening.

b6-1/7c-1

d. On the 13th of August, detainee [REDACTED] was lying on the concrete outside of his
cell. [REDACTED] was the medical officer tending to the detainees.
She asked the MPs what was wrong and they informed her that the detainee had been
feeling ill from the night prior. [REDACTED] reports that the detainee told him that he had
stomach problems and couldn't eat meat and wanted milk. She informed the MPs that
she wanted to see him after evaluating the new detainees. [REDACTED] reports that

b6-2/7c-2

6234

AFZC-FC-C

SUBJECT: Findings and Recommendations of Informal Investigation of death of Iraqi detainee [REDACTED]

given three MREs a day but the MPs report that most of the detainees don't eat them as they complain of the smell and taste.

h. An interpreter from the MI BN is available on occasion but most of the time the MPs and medical personnel rely on other detainees to help with the language barrier. The MI interpreter claims that he had talked with detainee [REDACTED] in the past but not during this incident and has no knowledge of any medical history on the detainee.

i. The medical officers of E Co 204 FSB and the 1982 FST. Physicians, physician's assistants, nurse anesthetists, and registered nurses perform the medical evaluations and sick call duties at the detainee camp. Physicians and physician's assistants have credentials to provide this type of medical care, however, nurse anesthetists and registered nurses do not have the same practicing privileges. Individual's credential packets were not available for review.

2. RECOMMENDATIONS

a. All medical information and encounters should be documented. A paper trail becomes significant and is standard of care throughout the world. Documentation provides better care and protects those providing the care. Recommend that the initial medical screening and all medical encounters and interventions be documented and placed in the detainee's file.

b. Ensure all providers providing medical care have the appropriate credentials and skills. Many nurses have learned through their experiences how to care for individuals but they do not have the authority to examine, diagnose, and treat medical conditions. With that said, they may not have the knowledge base to recognize a problem that needs further attention. Recommend that nurses and nurse anesthetists provide care within the scope of their credentials. If nurses continue to provide care, recommend that the supervising physician provide a guideline for them to follow and list the conditions/procedures that they can perform autonomously and those conditions that need to be referred to a physician or physician assistant. Also recommend that all documentation be reviewed and signed by a physician with the appropriate credentials.

c. Interpreters are a must. It is apparent that many individuals had differing opinions as to what detainee # [REDACTED] was complaining of and the designated interpreter was not involved in any aspect of this case. Without the use of an interpreter and relying on another detainee to bridge the language gap, it becomes a guessing game as to what an individual is saying. If detainee [REDACTED] had chest pain the night prior to his death, no one was aware of it and that may be due to the language barrier. If this was known, his death may have been prevented. Recommend that an interpreter be readily available in all detainee camps, especially for the initial medical interview and during sick call.

AFZC-FC-C

SUBJECT: Findings and Recommendations of Informal Investigation of death of Iraqi
detainee [REDACTED]

b6-4
b7c-4

d. Autopsy. To give a definitive cause of death, an autopsy is required. Without an autopsy I can not comment on whether or not detainee [REDACTED] death was related to his living conditions, heat, medical care (or lack of), or underlying ailments. Recommend that future deaths of Iraqi detainees undergo autopsy so more can be learned about the causative factors and can possibly help with future operations and care.

3. The POC is the undersigned (DNVT 534-[REDACTED])

(L)(6)-2
(6)(7)(2)

[REDACTED]

MAJ, MC
BN Surgeon, 64 FSB

REPORT OF PROCEEDINGS BY INVESTIGATING OFFICER/BOARD OF OFFICERS

For use of this form, see AR 15-6; the proponent agency is OTJAG.

IF MORE SPACE IS REQUIRED IN FILLING OUT ANY PORTION OF THIS FORM, ATTACH ADDITIONAL SHEETS

SECTION I - APPOINTMENT

Appointed by

[Redacted]

(b)(6)-2

(Appointing authority)

on 15 August 2003 (Date) (Attach inclosure 1: Letter of appointment or summary of oral appointment data.) (See para 3-15, AR 15-6.)

SECTION II - SESSIONS

The (investigation) (board) commenced at 21st CSH, LSA Anaconda, Balad, Iraq at 1000 hours
(Place) (Time)

on 16 August 2003 (Date) (If a formal board met for more than one session, check here . Indicate in an inclosure the time each session began and ended, the place, persons present and absent, and explanation of absences, if any.) The following persons (members, respondents, counsel) were present: (After each name, indicate capacity, e.g., President, Recorder, Member, Legal Advisor.)

The following persons (members, respondents, counsel) were absent: (Include brief explanation of each absence.) (See paras 5-2 and 5-8a, AR 15-6.)

The (investigating officer) (board) finished gathering/hearing evidence at 1330 hours on 16 August 2003
(Time) (Date)
and completed findings and recommendations at 1800 hours on 24 August 2003
(Time) (Date)

SECTION III - CHECKLIST FOR PROCEEDINGS

A. COMPLETE IN ALL CASES

	YES	NO ^{1/}	NA ^{2/}
1. Inclosures (para 3-15, AR 15-6)			
Are the following inclosed and numbered consecutively with Roman numerals: (Attached in order listed)			
a. The letter of appointment or a summary of oral appointment data?	X		
b. Copy of notice to respondent, if any? (See item 9, below)			X
c. Other correspondence with respondent or counsel, if any?			X
d. All other written communications to or from the appointing authority?			X
e. Privacy Act Statements (Certificate, if statement provided orally)?	X		
f. Explanation by the investigating officer or board of any unusual delays, difficulties, irregularities, or other problems encountered (e.g., absence of material witnesses)?			X
g. Information as to sessions of a formal board not included on page 1 of this report?			X
h. Any other significant papers (other than evidence) relating to administrative aspects of the investigation or board?	X		

FOOTNOTES: ^{1/} Explain all negative answers on an attached sheet.
^{2/} Use of the N/A column constitutes a positive representation that the circumstances described in the question did not occur in this investigation or board.

		YES	NO
2	Exhibits (para 3-16, AR 15-6)		
	a. Are all items offered (whether or not received) or considered as evidence individually numbered or lettered as exhibits and attached to this report?		
	b. Is an index of all exhibits offered to or considered by investigating officer or board attached before the first exhibit?		X
	c. Has the testimony/statement of each witness been recorded verbatim or been reduced to written form and attached as an exhibit?		
	d. Are copies, descriptions, or depictions (if substituted for real or documentary evidence) properly authenticated and is the location of the original evidence indicated?		X
	e. Are descriptions or diagrams included of locations visited by the investigating officer or board (para 3-6b, AR 15-6)?		
	f. Is each written stipulation attached as an exhibit and is each oral stipulation either reduced to writing and made an exhibit or recorded in a verbatim record?		
	g. If official notice of any matter was taken over the objection of a respondent or counsel, is a statement of the matter of which official notice was taken attached as an exhibit (para 3-16d, AR 15-6)?		
3	Was a quorum present when the board voted on findings and recommendations (paras 4-1 and 5-2b, AR 15-6)?		
B. COMPLETE ONLY FOR FORMAL BOARD PROCEEDINGS (Chapter 5, AR 15-6)			
4	At the initial session, did the recorder read, or determine that all participants had read, the letter of appointment (para 5-3b, AR 15-6)?		
5	Was a quorum present at every session of the board (para 5-2b, AR 15-6)?		
6	Was each absence of any member properly excused (para 5-2a, AR 15-6)?		
7	Were members, witnesses, reporter, and interpreter sworn, if required (para 3-1, AR 15-6)?		
8	If any members who voted on findings or recommendations were not present when the board received some evidence, does the inclosure describe how they familiarized themselves with that evidence (para 5-2d, AR 15-6)?		
C. COMPLETE ONLY IF RESPONDENT WAS DESIGNATED (Section II, Chapter 5, AR 15-6)			
9	Notice to respondents (para 5-5, AR 15-6):		
	a. Is the method and date of delivery to the respondent indicated on each letter of notification?		
	b. Was the date of delivery at least five working days prior to the first session of the board?		
	c. Does each letter of notification indicate —		
	(1) the date, hour, and place of the first session of the board concerning that respondent?		
	(2) the matter to be investigated, including specific allegations against the respondent, if any?		
	(3) the respondent's rights with regard to counsel?		
	(4) the name and address of each witness expected to be called by the recorder?		
	(5) the respondent's rights to be present, present evidence, and call witnesses?		
	d. Was the respondent provided a copy of all unclassified documents in the case file?		
	e. If there were relevant classified materials, were the respondent and his counsel given access and an opportunity to examine them?		
10	If any respondent was designated after the proceedings began (or otherwise was absent during part of the proceedings):		
	a. Was he properly notified (para 5-5, AR 15-6)?		
	b. Was record of proceedings and evidence received in his absence made available for examination by him and his counsel (para 5-4c, AR 15-6)?		
11	Counsel (para 5-6, AR 15-6):		
	a. Was each respondent represented by counsel?		
	Name and business address of counsel:		
	(If counsel is a lawyer, check here <input type="checkbox"/>)		
	b. Was respondent's counsel present at all open sessions of the board relating to that respondent?		
	c. If military counsel was requested but not made available, is a copy (or, if oral, a summary) of the request and the action taken on it included in the report (para 5-6b, AR 15-6)?		
12	If the respondent challenged the legal advisor or any voting member for lack of impartiality (para 5-7, AR 15-6):		
	a. Was the challenge properly denied and by the appropriate officer?		
	b. Did each member successfully challenged cease to participate in the proceedings?		
13	Was the respondent given an opportunity to (para 5-8a, AR 15-6):		
	a. Be present with his counsel at all open sessions of the board which deal with any matter which concerns that respondent?		
	b. Examine and object to the introduction of real and documentary evidence, including written statements?		
	c. Object to the testimony of witnesses and cross-examine witnesses other than his own?		
	d. Call witnesses and otherwise introduce evidence?		
	e. Testify as a witness?		
	f. Make or have his counsel make a final statement or argument (para 5-9, AR 15-6)?		
14	If requested, did the recorder assist the respondent in obtaining evidence in possession of the Government and in arranging for the presence of witnesses (para 5-8b, AR 15-6)?		
15	Are all of the respondent's requests and objections which were denied indicated in the report of proceedings or in an inclosure or exhibit to it (para 5-11, AR 15-6)?		

FOOTNOTES: 1) Explain all negative answers on an attached sheet.
 2) Use of the N/A column constitutes a positive representation that the circumstances described in the question did not occur in this investigation or board.

SECTION IV - FINDINGS (para 3-10, AR 15-6)

The (investigating officer) (board), having carefully considered the evidence, finds:

(SEE ATTACHED MEMO)

SECTION V - RECOMMENDATIONS (para 3-11, AR 15-6)

In view of the above findings, the (investigating officer) (board) recommends:

(SEE ATTACHED MEMO)

SECTION VI - AUTHENTICATION (para 3-17, AR 15-6)

THIS REPORT OF PROCEEDINGS IS COMPLETE AND ACCURATE. (If any voting member or the recorder fails to sign here or in Section VI, below, indicate the reason in the space where his signature should appear.)

(Recorder)

SEE ATTACHED FINDINGS + RECOMMENDATIONS MEMORANDUM

Investigating Officer (President)

(Member)

(Member)

(Member)

(Member)

SECTION VII - MINORITY REPORT (para 3-13, AR 15-6)

To the extent indicated in Inclosure _____, the undersigned do(es) not concur in the findings and recommendations of the board. (In the inclosure, identify by number each finding and/or recommendation in which the dissenting member(s) do(es) not concur. State the reasons for disagreement. Additional/substitute findings and/or recommendations may be included in the inclosure.)

(Member)

(Member)

SECTION VIII - ACTION BY APPOINTING AUTHORITY (para 2-3, AR 15-6)

The findings and recommendations of the (investigating officer) (board) are (approved) (disapproved) (approved with following exceptions/substitutions). (If the appointing authority returns the proceedings to the investigating officer or board for further proceedings or corrective action, attach that correspondence (or a summary, if oral) as a numbered inclosure.)

RECEIVED

09 SEP 2000

RAYMOND T. ODIERNO
Major General, USA
Commanding

6291

DEPARTMENT OF THE ARMY
3d BRIGADE COMBAT TEAM
4th INFANTRY DIVISION (MECHANIZED)
BALAD, IRAQ APO AE 09323-2612

AFCZ-FC-JA

5 September 2003

MEMORANDUM FOR RECORD

SUBJECT: AR 15-6 Investigation - Detainee Death at 2d BCT Detainment Facility.

1. This is to clarify the missing signature of the Investigating Officer [REDACTED] on the DA Form 1574. [REDACTED] completed her investigation with the findings and recommendations on 24 Aug 03. Her investigation was complete except for the DA Form 1574. [REDACTED] received a Red Cross Message and left the area before the DA Form 1574 could be completed. The 3d BCT Legal Cell filled in the enclosed DA Form 1574 using the investigation. [REDACTED] did sign her findings and recommendations memorandum.

2. POC is the undersigned at 534-[REDACTED]

[REDACTED]
SSG, USA
NCOIC, 3d BCT Legal Cell

b6-2
b7c-2



DEPARTMENT OF THE ARMY
HEADQUARTERS TASK FORCE IRONHORSE
TIKRIT, IRAQ

REPLY TO
ATTENTION OF

AFYB-CG

15 August 2003

MEMORANDUM FOR: [REDACTED] C Company, 64th FSB

SUBJECT: Appointment as a 15-6 Investigating Officer

1. You are hereby appointed an investigating officer pursuant to AR 15-6 and AR 210-7, paragraph 4-3, to conduct an informal investigation into the shooting death of a detainee on 13 July 2003. Additionally, you are to identify any systemic problems that the command can address and correct, if necessary.
2. You will use informal procedures under AR 15-6, Chapter 4. You will make specific findings and recommendations on all relevant issues you identify in the course of your investigation. If, during your investigation, you suspect that persons you intend to interview may have violated any provision of the Uniform Code of Military Justice (UCMJ) or any other criminal law, you must advise them of their rights under the UCMJ, Article 31, or the Fifth Amendment, as appropriate. Rights warnings and waivers will be documented on DA Form 3881. Provide each witness a Privacy Act statement before you solicit any personal information. All witness statements will be sworn and recorded on DA Form 2823.
3. Before proceeding with the investigation, contact [REDACTED] at 534-[REDACTED] for an initial legal briefing. [REDACTED] will serve as your primary legal advisor.
4. Your report, together with all evidence marked as exhibits, will be submitted to me in memorandum format no later than ten days from the date you receive this memorandum. Submit any requests for delay to me either orally or in writing. You will obtain a written legal review prior to submitting the completed investigation.

b6-2

FOR THE COMMANDER:

[REDACTED]

COL, GS
Chief of Staff

6293

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE II

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION: Rob War horse
2. DATE: 16 Aug 03
3. TIME: 1332
4. FILE NO.
5. NAME (Last, First, MI)
6. SSN
7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army CCo 6th FSB 38CTAIN and wanted to question me about the following offense(s) of which I am suspected/accused: information regarding death of Iraqi detainees

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. This lawyer can be a civilian lawyer I arrange for at no expense to the Government or a military lawyer detailed for me at no expense to me, or both.

- (For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. I understand that this lawyer can be one that I arrange for at my own expense, or if I cannot afford a lawyer and want one, a lawyer will be appointed for me before any questioning begins.
4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side).

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (if available)
1a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE
2a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything
2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
 - a. Your official position.
 - b. Nature of offense(s).
 - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:

"Before I ask you any questions, you must understand your rights."

 - a. "You do not have to answer my questions or say anything."
 - b. "Anything you say or do can be used as evidence against you in a criminal trial."
 - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent *i.e., fewer than 30 days ago*), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" *(If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)*

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE III

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 30, United States Code, Section 3012(g)
 PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
 ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
 DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION FOB Warhorse	2. DATE 10 Aug 83	3. TIME 1254	4. FILE NO.
5. NAME (Last, First, MI) [REDACTED]	8. ORGANIZATION OR ADDRESS 4th MP Ft Hood TX		
6. SSN [REDACTED]	7. GRADE/STATUS PFC E-3		

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C Co 64 FSB 3BCT 4ID and wanted to question me about the following offense(s) of which I am suspected/accused: information regarding death of Iraqi detainees
 Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- I do not have to answer any question or say anything.
 - Anything I say or do can be used as evidence against me in a criminal trial.
 - For personnel subject to the UCMJ* I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. This lawyer can be a civilian lawyer I arrange for at no expense to the Government or a military lawyer detailed for me at no expense to me, or both.
- or -
- (For civilians not subject to the UCMJ)* I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. I understand that this lawyer can be one that I arrange for at my own expense, or if I cannot afford a lawyer and want one, a lawyer will be appointed for me before any questioning begins.
- If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)		3. SIGNATURE OF INTERVIEWEE
1a. NAME (Type or Print)		[REDACTED]
b. ORGANIZATION OR ADDRESS AND PHONE		
2a. NAME (Type or Print)	[REDACTED]	4. SIGNATURE OF INVESTIGATOR
b. ORGANIZATION OR ADDRESS AND PHONE	2/4 MP Co., Camp Warhorse	5. TYPED NAME OF INVESTIGATOR
		6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

- I do not want to give up my rights
 I want a lawyer I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
 - a. Your official position.
 - b. Nature of offense(s).
 - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:

"Before I ask you any questions, you must understand your rights."

 - a. "You do not have to answer my questions or say anything."
 - b. "Anything you say or do can be used as evidence against you in a criminal trial."
 - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (*i.e.*, fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE
For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION FOB Workhorse	2. DATE 16 Aug 03	3. TIME 1245	4. FILE NO.
5. NAME (Last, First, MI) [REDACTED]	8. ORGANIZATION OR ADDRESS [REDACTED]		
6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]		

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army 1st Co 64FSB 3BCT and wanted to question me about the following offense(s) of which I am suspected/accused: information regarding death of Iraqi detainee

- Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:
- I do not have to answer any question or say anything.
 - Anything I say or do can be used as evidence against me in a criminal trial.
 - (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. This lawyer can be a civilian lawyer I arrange for at no expense to the Government or a military lawyer detailed for me at no expense to me, or both.

- or -

(For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. I understand that this lawyer can be one that I arrange for at my own expense, or if I cannot afford a lawyer and want one, a lawyer will be appointed for me before any questioning begins.

- If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)		3. SIGNATURE OF INTERVIEWEE [REDACTED]
1a. NAME (Type or Print)		4. SIGNATURE OF INVESTIGATOR [REDACTED]
b. ORGANIZATION OR ADDRESS AND PHONE		5. TYPED NAME OF INVESTIGATOR [REDACTED]
2a. NAME (Type or Print)		6. ORGANIZATION OF INVESTIGATOR [REDACTED]
b. ORGANIZATION OR ADDRESS AND PHONE		

Section C. Non-waiver

- I do not want to give up my rights
 I want a lawyer
 I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
 - a. Your official position.
 - b. Nature of offense(s).
 - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:

"Before I ask you any questions, you must understand your rights."

 - a. "You do not have to answer my questions or say anything."
 - b. "Anything you say or do can be used as evidence against you in a criminal trial."
 - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."
Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
 - a. Your official position.
 - b. Nature of offense(s).
 - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:

"Before I ask you any questions, you must understand your rights."

 - a. "You do not have to answer my questions or say anything."
 - b. "Anything you say or do can be used as evidence against you in a criminal trial."
 - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE I

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION: Fob Warhorse
2. DATE: 10 Aug 03
3. TIME: 1230
5. NAME: [Redacted]
6. SSN: [Redacted]
7. GRADE/STATUS: [Redacted]
8. ORGANIZATION OR ADDRESS: [Redacted]

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C Co 64FSB 3BCT 41A

suspected/accused: information regarding death of Iraqi detainee
Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. For personnel subject to the UCMJ I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. This lawyer can be a civilian lawyer I arrange for at no expense to the Government or a military lawyer detailed for me at no expense to me, or both.
4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)
1a. NAME (Type or Print)
1b. ORGANIZATION OR ADDRESS AND PHONE
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything
2. SIGNATURE OF INTERVIEWEE

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE VI

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION: FOB War Horse
2. DATE: 16 Aug 03
3. TIME: 1104
4. FILE NO.
5. NAME (Last, First, MI)
6. SSN
7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C Co 64FSB3BCAH I

and wanted to question me about the following offense(s) of which I am suspected/accused: interview regarding death of Iraqi detainee

Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.

- or -

(For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.

- 4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)
1a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

- 1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
 - a. Your official position.
 - b. Nature of offense(s).
 - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:

"Before I ask you any questions, you must understand your rights."

 - a. "You do not have to answer my questions or say anything."
 - b. "Anything you say or do can be used as evidence against you in a criminal trial."
 - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (*i.e., fewer than 30 days ago*), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" *(If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)*

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS *(Continued)*

6303

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE VI

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION: FOB Warhorse
2. DATE: 16 Aug 03
3. TIME: 1104
4. FILE NO.
5. NAME (Last, First, MI)
6. SSN
7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C. Co 64 ASB 3 BCT 11

suspected/accused: interview regarding death of Iraqi detainee
Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.
4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)

1a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE
2a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE

3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

- 1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

6304

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

WARNING - Inform the suspect/accused of:

- a. Your official position.
- b. Nature of offense(s).
- c. The fact that he/she is a suspect/accused.

RIGHTS - Advise the suspect/accused of his/her rights as follows:

"Before I ask you any questions, you must understand your rights."

- a. "You do not have to answer my questions or say anything."
- b. "Anything you say or do can be used as evidence against you in a criminal trial."
- c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer, before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

If the suspect/accused says "yes," find out when and where. If the request is recent (*i.e.*, fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of a det interrogation, completion may be temporarily postponed. Notes should be made on the circumstances.

FOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

ADDITIONAL COMMENTS (Continued)

6305

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION: FOB Warhorse
2. DATE: 16 Aug 03
3. TIME: 1128
4. FILE NO.
5. NAME (Last, First, MI)
6. SSN
7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C. C. 6A FSB 2BCT 4ID

and wanted to question me about the following offense(s) of which I am suspected/accused: information regarding death of Iraqi detainee

Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.

(For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. I understand that this lawyer can be one that I arrange for at my own expense, or if I cannot afford a lawyer and want one, a lawyer will be appointed for me before any questioning begins.

- 4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)
1a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

- 1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
 - a. Your official position.
 - b. Nature of offense(s).
 - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:

"Before I ask you any questions, you must understand your rights."

 - a. "You do not have to answer my questions or say anything."
 - b. "Anything you say or do can be used as evidence against you in a criminal trial."
 - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"
 (If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"
 (If the suspect/accused says "yes," find out when and where. If the request was recent *(i.e., fewer than 30 days ago)*, obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"
 (If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" *(If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)*

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

6307

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE VIII

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION: FEB Warhorse
2. DATE: 16 Aug 03
3. TIME: 1115
4. FILE NO.
5. NAME (Last, First, MI): [Redacted]
6. SSN: [Redacted]
7. GRADE/STATUS: [Redacted]
8. ORGANIZATION OR ADDRESS: [Redacted]

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army CCo 64FSB 3BCT+IA and wanted to question me about the following offense(s) of which I am suspected/accused: information regarding death of detainee (Frager)
Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. For personnel subject to the UCMJ I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. This lawyer can be a civilian lawyer I arrange for at no expense to the Government or a military lawyer detailed for me at no expense to me, or both.

- or -

(For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. I understand that this lawyer can be one that I arrange for at my own expense, or if I cannot afford a lawyer and want one, a lawyer will be appointed for me before any questioning begins.

- 4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)
1a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
2a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

- 1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

6308

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
 - a. Your official position.
 - b. Nature of offense(s).
 - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:

"Before I ask you any questions, you must understand your rights."

 - a. "You do not have to answer my questions or say anything."
 - b. "Anything you say or do can be used as evidence against you in a criminal trial."
 - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."
- Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

6309

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE TX

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

Form with fields: LOCATION (CAMP WARHORSE), DATE (16 AUG 03), TIME (1041), FILE NO., NAME (Last, First, MI), ORGANIZATION OR ADDRESS, SSN, GRADE/STATUS. Includes handwritten notations b6-4, b7C-4.

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C Co 6AFSB 3BCT 4T and wanted to question me about the following offense(s) of which I am suspected/accused: incident of Iraqi detainees death before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- I do not have to answer any question or say anything.
Anything I say or do can be used as evidence against me in a criminal trial.
If for personnel subject to the UCMJ I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.

- or -

(For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.

If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

Form with fields: WITNESSES (Name, Organization), SIGNATURE OF INTERVIEWEE, SIGNATURE OF INVESTIGATOR, TYPED NAME OF INVESTIGATOR, ORGANIZATION OF INVESTIGATOR. Includes handwritten notations b6-2, b7C-2, b6-4, b7C-4.

Section C. Non-waiver

- I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything

SIGNATURE OF INTERVIEWEE [Redacted]

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

6310

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
 - a. Your official position.
 - b. Nature of offense(s).
 - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:

"Before I ask you any questions, you must understand your rights."

 - a. "You do not have to answer my questions or say anything."
 - b. "Anything you say or do can be used as evidence against you in a criminal trial."
 - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

6311

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE X

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION: FOB Warhorse, Iraq
2. DATE: 16 Aug 03
3. TIME: 1050
4. FILE NO.
5. NAME (Last, First, MI)
6. SSN
7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C Co 64FSB 3 BCT AEN and wanted to question me about the following offense(s) of which I am suspected/accused: information regarding death of Iraqi detainees. Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. This lawyer can be a civilian lawyer I arrange for at no expense to the Government or a military lawyer detailed for me at no expense to me, or both.

- or -

(For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. I understand that this lawyer can be one that I arrange for at my own expense, or if I cannot afford a lawyer and want one, a lawyer will be appointed for me before any questioning begins.

- 4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)

1a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE
2a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

- 1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
 - a. Your official position.
 - b. Nature of offense(s).
 - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:

"Before I ask you any questions, you must understand your rights."

 - a. "You do not have to answer my questions or say anything."
 - b. "Anything you say or do can be used as evidence against you in a criminal trial."
 - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

SECURITY FORCES APPREHENSION REPORT
(NOT APPLICABLE, UPON APPROVAL)

then describe:

- Burglary or Housebreaking (I.P.C. 477)
- Criminal Communication, Forgery, (I.P.C. 477)
- Theft (I.P.C. 439)
- Destruction of Property (I.P.C. 477)
- Obstructing a Public Highway/Place (I.P.C. 477)
- Discharging Firearm/ Explosive in City (I.P.C. 477)
- Riot or Breach of Peace (I.P.C. 477)
- Other

then describe: *Michael ...*

- Trespass on Military Installation or Facility
- Photographing/Surveillance of Installation
- Obstructing Performance of Military Mission
- Other

Theft of Coalition Force Property

Apprehending Unit: *H 2820* Location Grid: *AG 5428 2333 17*

Date of Incident (D/M/Y) *3 18 10* Time of Incident *0000* hrs to *0000* hrs Date of Report (D/M/Y) *3 18 10*

Apprehended *0452008* Key Connected Person: Victim

Last Name: *[Redacted]* Given Name: *[Redacted]* Last Name: *[Redacted]* Given Name: *[Redacted]*

b6-4
b7C-4

Height: *[Redacted]* in Eye Color: *[Redacted]* Hair Color: *[Redacted]* Skin Color: *[Redacted]*

Address: *[Redacted]* Place of Birth: *[Redacted]*

Place #: *[Redacted]* Ethnic/Tribal Group: *[Redacted]* Sex: *[Redacted]*

Religion: *[Redacted]* Military Service: Regular

Document #: *[Redacted]* Document #: *[Redacted]*

Other (specify) Passport Driver License

Other (specify) Passport Driver License

Vehicle(s) Vehicle Number: *[Redacted]* Vehicle(s): *[Redacted]* Owner: *[Redacted]*

Color: *[Redacted]* VIN: *[Redacted]* Type: *[Redacted]* Plate No: *[Redacted]* Number of People in Vehicle: *[Redacted]*

Names of People in Vehicle: *[Redacted]*

Weapon Photo Taken of Suspect with Weapon/Control: *[Redacted]*

Model: *[Redacted]* Color/Caliber: *[Redacted]*

Quantity: *[Redacted]* Make: *[Redacted]* Receipt Provided (Y/N): *[Redacted]*

Where Found: *[Redacted]* Owner: *[Redacted]*

Supervising Officer's Name (Print): *[Redacted]* Email, Phone, or Contact Info: *[Redacted]*

Reporting Soldier's Name (Print): *[Redacted]* Last, First MI: *[Redacted]*

Signature: *[Redacted]* Last, First MI: *[Redacted]*

Date: *3 18 10* Unit Phone: *[Redacted]*

b6-2
b7C-2

b6-2
b7C-2

COALITION PROVISIONAL AUTHORITY FORCES APPREHENSION FORM

b6-4
b7C-4

Why was this person detained? *He was detained because he was suspected of involvement in the planning and the execution of the 9/11 and was taken to the detention facility at Guantanamo Bay. The individuals in the party were members of the Taliban.*

Who witnessed this person being detained or the reason for detention? Give names, contact number, etc. (if any)

[Redacted]

b6-2
b7C-2

How was this person being transported (by foot, bus, on foot)? *by bus in his home*

The individual was with his family when he was
b6-4
b7C-4

What was this person carrying? *None*

What contraband was this person carrying? *None*

What items were seized?

What information did you get from this person?

The individual stated that he was surprised when he was approached and asked to file information as he was trying to show his innocence.

EVIDENCE/PROPERTY CUSTODY DOCUMENT

For use of this form see AR 190-45 and AR 195-6; the proponent agency is US Army Criminal Investigation Command.

SECURITY NUMBER

035 28082

CRD REPORT/CID ROI NUMBER

RECEIVING ACTIVITY <i>2/4 MP Co 410</i>	LOCATION <i>CAMP WARHORSE</i>
NAME, GRADE AND TITLE OF PERSON FROM WHOM RECEIVED <input type="checkbox"/> OWNER <input type="checkbox"/> OTHER	ADDRESS: (Include Zip Code)
LOCATION FROM WHERE OBTAINED <i>B 2/8 21 AS</i>	REASON OBTAINED <i>Personal Property</i>
	TIME/DATE @ OBTAINED <i>0308803 0013</i>

ITEM NO.	QUANTITY	DESCRIPTION OF ARTICLES <i>(Include model, serial number, condition and unusual marks or scratches)</i>
1	1	<i>250 Diner</i>
2	1	<i>100 Diner</i>
3	3	<i>ID CARDS</i>
4	1	<i>white undershirt</i>
<i>/// Nothing follows ///</i>		

CHAIN OF CUSTODY

ITEM NO.	DATE	RELEASED BY	RECEIVED BY	PURPOSE OF CHANGE OF CUSTODY
	<i>0308803</i>	SIGNATURE <i>D 2/4 MP</i> NAME, GRADE OR TITLE	SIGNATURE <i>[Redacted]</i> NAME, GRADE OR TITLE <i>[Redacted]</i>	<i>Personal Property</i>
		SIGNATURE	SIGNATURE	
		NAME, GRADE OR TITLE	NAME, GRADE OR TITLE	
		SIGNATURE	SIGNATURE	
		NAME, GRADE OR TITLE	NAME, GRADE OR TITLE	
		SIGNATURE	SIGNATURE	
		NAME, GRADE OR TITLE	NAME, GRADE OR TITLE	
		SIGNATURE	SIGNATURE	
		NAME, GRADE OR TITLE	NAME, GRADE OR TITLE	

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 5, USC Section 301; Title 5, USC Section 295 (b); E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be securely
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and routing.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION: CAMP WARHORSE, IR/RAQ
2. DATE: 2003/008/03
3. TIME: 1645
4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME: [REDACTED]
6. SSNN: [REDACTED]
7. GRADE/PALLET: [REDACTED]
8. ORGANIZATION OR ADDRESS: [REDACTED]
9. [REDACTED]

I WANT TO MAKE THE FOLLOWING STATEMENT: Detainees numbers [REDACTED] and [REDACTED] were all detained by 625 IN (TIF II-67) during a raid on suspected Ba'ath Party members and suspects involved in mortar attacks of Camps Warhorse and Scuncheon. All weapons were turned in to the Camp Warhorse Detention Center. All AK-47's and pistols will be subsequently turned over to the Baqubah Police Station where they will be distributed to various police stations in the Diyala Province. All larger weapons and explosives will be released to engineers for final disposition. //END OF STATEMENT//

10. EXHIBIT
11. INITIALS OF PERSON MAKING STATEMENT: [REDACTED]
PAGE 1 OF 1

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT _____ DATED _____
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

6317

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

EXH. BIT B

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION: Camp Warhorse, IRAQ
2. DATE: 2003/08/14
3. TIME: 1053
4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME
6. SSN
7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS

9. I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH
I was at E-MED Aid station they received a call saying a Detainee was vomiting so I came to check it out. When I arrived he was not vomiting at the time, but had some fluid coming out of his nose, I was going to start an I.V. but I decided to go back to the Aid station to ask what to do. I was told to give him an I.V. If his vitals were not outrageous and return to tell [REDACTED] what the situation was and she told me if I think he was too serious to bring him down. I go back to the Detention facility to do so and the guy went from breathing and having a pulse to not having anything. [REDACTED] started CPR and I returned to get a vehicle to pick him up with. They sent a e-vac team in a m998 to pick him up, when they arrived they reassessed his vitals and still nothing so we stopped CPR put him on a litter and took him to the Aid station.

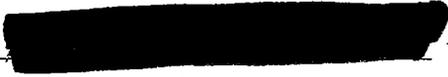
/// END OF STATEMENT ///

10. EXHIBIT
11. INITIALS OF PERSON MAKING STATEMENT
PAGE 1 OF 3 PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

USE THIS PAGE IF NEEDED. IF THIS PAGE IS NOT NEEDED, PLEASE PROCEED TO FINAL PAGE OF THIS FORM.

STATEMENT OF



TAKEN AT

Camp Warhorse DATED 2003/08/14

9. STATEMENT (Continued)

Not used



b6-4
b7C-4

STATEMENT OF

[REDACTED]

TAKEN AT Camp Warhorse DATED 2003/08/14

9. STATEMENT (Continued)

[Large handwritten scribble covering the main body of the page]

Not used

[REDACTED]

b6-4
b7C-4

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 3. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED]

(Signature of Person Making Statement)

WITNESSES:

b6-4
b7C-4

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16th day of August, 2003 at

[REDACTED]

(Signature of Person Administering Oath)

[REDACTED]

(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

b6-2

INITIALS OF PERSON MAKING STATEMENT

[REDACTED]

PAGE 3 OF 3 PAGES

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

Exhibit C

LOCATION <i>Camp Warhorse</i>	DATE <i>15 August 03</i>	TIME <i>13:30</i>	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]		GRADE/STATUS [REDACTED]
ORGANIZATION OR ADDRESS [REDACTED]			

I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 13 August 03 I went to the Camp Warhorse's EPW center for the purpose of health screening the detainees. I was accompanied by two specialists from the 1982nd. Upon arrival we received a sheet of paper with the new detainees numbers on it, with columns for BP, pulse recording and treatments if needed. As I was walking by the 2 large holding areas for detainees, I noticed a civilian detainee lying outside on the sidewalk. He was speaking to the MP's. I asked what was wrong with him, the response from the MP was he felt ill the prior night. I said I would like to see him after the new detainees.

b6-4
b7C-4

With the help of an interpreter who was a detainee we saw and evaluated the new detainees, BP & P were checked and recorded on the sheet provided. I saw one young man in extreme distress - complaining of rectal pain, I deferred an exam and arranged for an ambulance to take him to ECHO MED for further exam. The last detainee I evaluated was the one lying on the sidewalk when I came in. He walked over and sat in a chair without assistance. Through the interpreter I asked how he was feeling, the response was "my nose hurts, it is dry, and sometimes blood comes out" - he kept gesturing to his nose. I said is there anything else bothering you? He again gestured to his nose and said it is hot and I can't sleep - through the

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF <u>2</u> PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF _____ TAKEN AT _____ DATED _____ CONTINUED." THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE _____ OF _____ PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

interpreter. I checked his BPs P. - I do not recall exactly, but it was around 119/70-88. Heart rate regular. The numbers were recorded on the daily record. I left instructions for this man to receive an extra water bottle and not go outside in the sun. This man did not appear to be in acute distress at the moment I was talking to him. He looked to be about 55 to 65 yrs of age and well nourished. His skin was warm and dry. There were no obvious signs of injury or trauma. I told the MP's if he were to act acutely ill, call for the ambulance to take him to Echo med right away.

Nothing further

b6-4
b7C-4

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED SIGNATURE]
(Signature of Person Making Statement)

b6-4
b7C-4

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 5th day of August 2003 at 1437

ORGANIZATION OR ADDRESS

[REDACTED SIGNATURE]
(Signature of Person Administering Oath)

b6-2

[REDACTED NAME]
(Typed Name of Person Administering Oath)

ORGANIZATION OR ADDRESS

[REDACTED AUTHORITY]
(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

[REDACTED INITIALS]
b6-4
b7C-4

EXHIBIT D 4
b6-4
b7c-4

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION <i>Camp Workhorse</i>	DATE <i>20030816</i>	TIME <i>1324</i>	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]	GRADE/STATUS [REDACTED]	
ORGANIZATION OR ADDRESS [REDACTED]			

b6-4
b7c-4

I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 20030813, at midday, prisoner #0352808 began complaining that he was ill. The previous day he had received an IV from the medics and had also complained to them earlier the day of the 13th, so we decided to let him out. ~~At 1600 the prisoner was still out of his cell. I was on radio watch in the front of the collection facility and at 1600 someone informed me that he still was ill, which I thought was strange, since he had been given more water and shade. I went back to see what was going on, and he was lying down, but seemed fatigued. I returned to the front to listen to the radio again. At about 1640, someone told me that the prisoner had vomitted and possibly defecated. I went back again to check on him, and there was a puddle next to his head and a stain where his buttocks were. Not knowing what to make of it, we informed our medic, who went to Echo Med to try to get the doctors to look at the prisoner. I once again returned to the front to monitor the radio. About 20 minutes passed and then someone ran and told me the prisoner had stopped breathing and was unconscious.~~

b6-4
b7c-4

b6-4
b7c-4

b6-4
b7c-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED] b6-4 b7c-4	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF _____ TAKEN AT _____ DATED _____ CONTINUED."
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE _____ OF _____ PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE

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At the same time, [redacted] returned and said he was told to evaluate the prisoner before the doctors could look at him. Once we told [redacted] what happened, he and [redacted] immediately drove to Echo Med to inform them the prisoner was unconscious and not breathing. I then went back to check on what was happening. The prisoner's heart had no pulse and Ssgt [redacted] had begun CPR. I noticed that air was barely going in while he exhaled into the CPR mask, so I plugged the prisoner's nose and held the mask down firmly. After a couple of minutes, the emergency personnel arrived and took the prisoner to the aid station. I returned to my post.

/// End of Statement ///

b6-4
b7C-4

b6-4
b7C-4

AFFIDAVIT

I, [redacted], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[redacted signature]
(Signature of Person Making Statement)

b6-4
b7C-4

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16th day of August 19 2003 at [redacted]

[redacted signature]
(Signature of Person Administering Oath)

b6-2

[redacted name]
(Typed Name of Person Administering Oath)

[redacted authority]
(Authority To Administer Oaths)

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

[redacted initials] b6-4 b7C-4

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION FCP Washouse	DATE 2007 08 16	TIME 1500	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]	GRADE/STATUS [REDACTED]	
ORGANIZATION OR ADDRESS [REDACTED]			

I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH

[REDACTED] prisoner # [REDACTED] stated the morning off by complaining of chest pains. We layed him outside on a blanket and gave him another full bottle of water, our platoon medic took care of # [REDACTED]. The prisoner then stated he wanted milk, and our medic, [REDACTED] gave him a dairy shake. After resting for about 30 min, prisoner # [REDACTED] walked back to his cell. Later on that evening, prisoner # [REDACTED] complained again of the same symptoms of earlier. We brought him outside again, layed him down, and gave him another bottle of extra water. Once the prisoner was resting, I went back to work in the front of the FCP. About 30 minutes later, I was told by the [REDACTED] to drive our medic to Echo medical facility. Once there, [REDACTED] went to the facility, and I stayed back in the Humvee. After about 5-10 minutes later, [REDACTED] returned and I drove back to the FCP. Upon arrival we were told that prisoner # [REDACTED] did not have a pulse, and was unconcious. I then drove in a hurry with [REDACTED] back to the Echo Medical Facility, we both told the medics and they came down in a Humvee to pick up the prisoner. Upon arrival the medics determined that he indeed did not have a pulse, and evacuated prisoner # [REDACTED] to their medical facility. This concludes my Sworn statement. END of statement

b6-4
b7C-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF _____ TAKEN AT _____ DATED _____ CONTINUED." THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE _____ OF _____ PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

b(6), b(3)

STATEMENT (Continued)

NOT
3AT

COSETD

b6-4
b7C-4

b6-4
b7C-4

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED]
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 15th day of August, 2003 at ISAC

ORGANIZATION OR ADDRESS

[REDACTED] b6-2
(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

[REDACTED] b6-2
(Typed Name of Person Administering Oath)

INITIALS OF PERSON MAKING STATEMENT

b7C-4
b6-4

[REDACTED]

(Authority To Administer Oaths)

b6-4
b7C-2

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION <i>Camp Warhorse, Iraq</i>	DATE <i>2003/08/16</i>	TIME <i>1401</i>	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]		GRADE/STATUS [REDACTED]
ORGANIZATION OR ADDRESS [REDACTED] Fort Hood, TX 76544			

b6-4
b7C-4

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

The first time I had any dealings with the detainee in question was on the night of 12 Aug 03, at approximately 2100 hrs. The detainee was brought outside of his cell. He was apparently overheated. I gave the detainee more water to drink and splash on him to cool him down. He was outside approximately 20 to 30 minutes, before he was brought back inside. The reason he was brought back in was because of a mortar attack on Camp Warhorse. The following morning at approximately 0900, the detainee was brought outside of his cell again, for not feeling well. I checked on him, he seemed to be OK, maybe just a little weak and overheated. When the PA arrived, a female [REDACTED], she examined him. She stated that his Blood Pressure was a little low, but not at a dangerous level, and just needed to be sure and eat and drink. The detainee stated that he had a stomach problem and he couldn't eat meats and wanted milk. The PA advised us to give him two dairy shakes in the morning and two in the evening along with his normal meal. At approximately 1600 hrs, the detainee was brought out of his cell again, he appeared to be overheated. He was complaining of being hot. I gave him more water and told two other detainees that were helping him to sprinkle water over his body to cool him down. I monitored him for a few minutes, and then went back to the Front of the Facility. About 15-20 minutes later I was notified by one of the guards that he had begun vomiting. I went back to check on him again and his breathing was a little bit labored, his pulse still felt good. I then went back to my truck and called the platoon TOC to get [REDACTED] to come down and help out. I was unable to make contact

b6-4
b7C-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF <u>2</u> PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF _____ TAKEN AT _____ DATED _____ CONTINUED."
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE _____ OF _____ PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

STATEMENT (Continued)

with anyone at the Platoon TOC, so I called Echo Med direct, requesting medical assistance for a detainee with labored breathing and was vomiting. About five minutes after that [redacted] showed up to examine the detainee. [redacted] noticed a liquid coming out his nose and was concerned about that. He also checked his pulse. [redacted] then left to go to the Aid Station to get further guidance. About five minutes after [redacted] left, the detainee stopped breathing. I checked for a pulse, there was nothing. I then ran to [redacted] aid bag to get a face shield and returned. I started CPR, checked for the rise of his chest, and then gave five compressions. [redacted] returned, realized I was giving CPR, and immediately returned to the Aid Station to get an Ambulance and Medical Support. The Medics and Ambulance arrived approximately 5 minutes after I started CPR. Once they arrived, the medic asked me how long I had been doing CPR. She instructed me to stop and get him on the stretcher. I helped put the stretcher on the truck and they left. // END OF STATEMENT //

b6-4
b7C-4

b6-4
b7C-4

AFFIDAVIT

I, [redacted], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR INTIMIDATION.

(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 18th day of August, 2003 at 1500

ORGANIZATION OR ADDRESS

(Signature of Person Administering Oath)

(Typed Name of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

b6-4
b7C-4

EXHIBIT 6

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION CAMP Warhorse	DATE 16 Aug 03	TIME 1115	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME	SOCIAL SECURITY NUMBER	GRADE/STATUS	
ORGANIZATION OR ADDRESS			

b6-4
b7c-4

I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:
 On 13 Aug 03 at 1700 hrs the Ambulance brought an Iraqi detainee litter patient. When the patient arrived he was not breathing and had no pulse. The Drs began working on his airway putting in an ET tube while [REDACTED] bagged the patient. [REDACTED] began chest compressions while myself and another medic began IV access. The patient was hooked up to the propak which was reading no pulse and no heart rhythm. [REDACTED] turned on the defib and charged and began shocking the patient, in between [REDACTED] and [REDACTED] continued CPR. The Drs pushed Atropene and epinephrine. At this time I began chest compressions and [REDACTED] began bagging. Some one brought over the ultrasound machine and the Drs looked for any signs of heart movement. There still was none present. [REDACTED] took over Defib and began her shocks. Still no heart beat. At this time [REDACTED] took over Defib, [REDACTED] began compressions. [REDACTED] did an axillary temp ¹⁰⁴. And [REDACTED] continued using defib while [REDACTED] continued compressions and [REDACTED] bagged. At this time it had been about 20 min. The Drs checked again still no pulse present and the patient was not breathing on his own. The time of death was called at 1719. [REDACTED] did a rectal

b6-4
b7c-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF [REDACTED] TAKEN AT [REDACTED] DATED [REDACTED] CONTINUED." THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE [REDACTED] OF [REDACTED] PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

STATEMENT (Continued):

temp which was 102.

nothing further

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED] (Signature of Person Making Statement)

b6-4
b7C-4

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16th day of August, 1973 at 230

ORGANIZATION OR ADDRESS

[REDACTED] (Signature of Person Administering Oath)

b6-2

ORGANIZATION OR ADDRESS

[REDACTED] (Typed Name of Person Administering Oath)

[REDACTED] (Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

EXHIBIT H

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION Camp Warhorse, France	DATE 16 Aug 03	TIME 1204	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]	GRADE/STATUS [REDACTED]	
ORGANIZATION OR ADDRESS [REDACTED]			

b6-4
b7C-4

I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 13 Aug 03, while working in the aid station, I was informed that a detainee at the EPW detention center was discovered unconscious and not breathing. Shortly thereafter, he arrived in the aid station. I received a report that he had "passed out" and found to be without a pulse or spontaneous respirations, so CPR had been in progress before his arrival.

On arrival at the aid station, the patient was apneic and pulseless. He was immediately placed on monitors, IV's established, CPR continued and intubated. When he was found to be in pulseless V-tach he was defibrillated in the usual manner and medications were administered (Epinephrine, atropine, lidocaine, bicarbonate). CPR was continued throughout the code resuscitation. Two cardiac ultrasounds revealed no cardiac motion. The patient arrived at 1700. At 1719 he had no pulse, no spontaneous respirations, no cardiac motion on ultrasound and an agonal rhythm. He was pronounced dead. Further details may be found in the SF600.

As the battalion surgeon for E/204 FSB I participate in the daily medical care of the detainees. My colleagues and I visit the detention center every morning. We medically screen all new detainees and medically evaluate all detainees requesting medical care. Patients are treated either at the detention facility or transported to the aid station, as appropriate. We are available on a 24 hour basis for detainee medical care.

b6-4 b7C-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF _____ TAKEN AT _____ DATED _____ CONTINUED." THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE _____ OF _____ PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

STATEMENT (Continued)

I believe conditions at the detention center are medically adequate. Food and water is provided in a sufficient amount. Medical care is timely and appropriate. Every possible effort is made to keep the detainees from becoming a next casualty. The only recommendation that I would make from a medical standpoint, would be to install fans or another cooling device at the detention center. - "END OF STATEMENT" -

b6-4
b7C-4

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE _____. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED]
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16th day of August, 2003 at

[REDACTED]
(Signature of Person Administering Oath)

b6-2

[REDACTED]
(Typed Name of Person Administering Oath)

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 2 PAGES

b6-4
b7C-4

EXHIBIT I

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION	DATE 16 Aug 03	TIME 1100	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME	SOCIAL SECURITY NUMBER		GRADE/STATUS
ORGANIZATION OR ADDRESS			

I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 13 Aug 03 at approx 1645, I was standing outside the aid station when [REDACTED] pulled up in an MP vehicle with another soldier, she ran up to me and asked if I could send the Ambulance crew over to the detainee camp they had a guy down. I rounded up a team from Ambulance Plt to go over with him. I then came inside the Aid station to inform the doctors of the situation. Approx 10-7 mins later the Ambulance crew pulled up and [REDACTED] was saying that the guy had been down for approx 5 min and the MP's were doing CPR when they arrived on site. We rushed the guy in and proceeded to assess the situation. We exposed his chest [REDACTED] checked for a pulse and told us to begin CPR, I began Chest compressions and [REDACTED] set up to begin breathing for him. After we began CPR, I yelled for someone to go get some more medics we needed more help. More medics came in and started to help. They started IV's and began to push cardiac meds. As things progressed [REDACTED] + I rotated out from our initial work positions to be replaced by other soldiers (medics) everyone kept working. The patient had been shocked three times with still to progress or improvement. He had been

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF [REDACTED] TAKEN AT [REDACTED] DATED [REDACTED] CONTINUED."
 THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE [REDACTED] OF [REDACTED] PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

STATEMENT (Continued)

intubated and had received several lifesaving drugs and interventions. When some one [redacted] asked for a rectal temp it was noticed that his bowels had moved. At that time [redacted] told everyone to pause what they were doing while he checked for a heartbeat and spontaneous breathing. When was present, he asked for the time, I read the time as 1719 and he called the patients time of death. We began to clean up and cover the patient.

This concludes my statement.

b6-4
b7c-4

Nothing follows

AFFIDAVIT

I, [redacted], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE [redacted] AND ENDS ON PAGE [redacted]. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[redacted] b6-4
[redacted] b7c-4
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16th day of August 2003 at

[redacted]

[redacted] b6-2
(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

[redacted]
(Typed Name of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

[redacted]

EXHIBIT J

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION CAMP WARHORSE	DATE 16 AUG 03	TIME 1040 Hrs	FILE NUMBER #
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]	GRADE/STATUS [REDACTED]	
ORGANIZATION OR ADDRESS [REDACTED]			

I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On Wednesday, 13 Aug 03 I was called to cover ambulance duty for a missing soldier at which point I was informed to head over to the POW/detainee center to pick-up a patient with no pulse by my platoon [REDACTED]. I picked up my kevlar and weapon and put on my DCU jacket and headed over to the "Ambulance" which was first-up, an M997 cargo Humvee [REDACTED] and [REDACTED] were already in it and I consequently got in the back. The ride to the detainee center took approximately one minute. I got out of the truck and headed for the detainee cells. This place is familiar. [REDACTED] was already there. I assumed she had already done an assessment because she asked me to load the patient on a litter that was already there. Some MPs and some detainees were there and assisted us with ^{this} [REDACTED]. I grabbed hold of one side of the litter and we all headed out toward the vehicle. [REDACTED] drove there and did not get out of the vehicle. I rode in the back of the vehicle with the patient. I "Bagged" the patient with a BVM (Bag-Valve-mask) apparatus under instruction from [REDACTED]. I remember giving him approximately 4 "breaths" before we got off ~~to~~ to the aid station. The "Bagging" ceased and I helped off-load the patient and rush him into the aid-station.

b6-4
b7c-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGES
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where we placed him on the litter-stands that were set-up and ready to receive him. Till this point it was still I, [redacted] and [redacted]. There were enough medics in the aid-station so I left and went back to the Humvee vehicle to pick-up my weapon. I was not further involved in the care of this patient.

b6-4
b7c-4

nothing further

AFFIDAVIT

I, [redacted], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[redacted] b6-4
[redacted] b7c-4
(Signature of Person Making Statement)

WITNESSES:

[redacted]

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16th day of August, 2003, at 1240

ORGANIZATION OR ADDRESS

[redacted] b6-2
(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

[redacted]
(Typed Name of Person Administering Oath)

ECO 204 FSB

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT [redacted]

EXHIBIT K

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION Eco med / FOB Warhorse Iraq	DATE 14 Aug 03	TIME 1100	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]	GRADE/STATUS [REDACTED]	
ORGANIZATION OR ADDRESS [REDACTED]			

I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On or about the 13th of Aug. 03, I was sitting outside of one of the sleep tents trying to stay out of the sun. [REDACTED] came by and said [REDACTED] told us someone needed to go pick up a Iraqi detainee at the detention center. I told [REDACTED] to grab his gear and we'll go. I ran out to the non-standard evac. vehicle, threw a litter in the back & hopped in the drivers seat. [REDACTED] ask me if I wanted her to come along. I said o.k. and she jumped in the passenger seat. [REDACTED] jumped in the back and we left. While enroute [REDACTED] told me that one of the m.p.'s, who came to get us, said the patient had no pulse. [REDACTED] and myself decide that her and [REDACTED] would go check out the patient while I preposition the vehicle for a quick exit. Once I parked the vehicle I stepped out and saw that [REDACTED] and others had placed the patient on a litter and were carrying him to the vehicle. [REDACTED] told me he had no pulse while we loaded him on the vehicle. We jumped in the vehicle and headed towards Eco med. I had [REDACTED] start ventilations with the BVM (bag valve mask). Once we arrived at Eco med, the three of us dismounted and carried the patient inside the Aid Station. Inside the aid station a litter stand had already been cleared and [REDACTED] & [REDACTED] were standing by. [REDACTED] started CPR while I provided respirations with the BVM. [REDACTED] Intubated the patient, several medics helped start two I.V.'s. The patient had a shockable heart rhythm and recieved several shocks from the defibulator. The doctors pushed a couple of cardiac drugs and monitors the effectiveness of the CPR. After 12-15 minutes, the doctors called the code and time of death. After wards I left the aid station.

b6-4
b7c-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF _____ TAKEN AT _____ DATED _____ CONTINUED."
 THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE _____ OF _____ PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

STATEMENT (Continued)

to check that the evac. vehicle was refitted ~~has~~
to be on standby. I then returned to the rest area
outside the tent. This concludes my statement.

Nothing Follows

[Redacted]

b6-4
b7C-4

AFFIDAVIT

I, [Redacted], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT
WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE
BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE
CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT
THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[Redacted] b6-4 b7C-4
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to
administer oaths, this 16th day of August, 19 2008
at 1230

ORGANIZATION OR ADDRESS

[Redacted] b6-2
(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

[Redacted]
(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

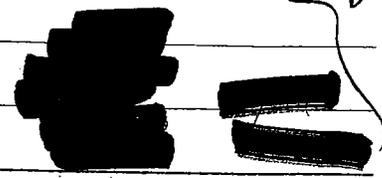
[Redacted]

EDICAL RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
3 Aug 03 7:00 arrived	Pt in via EMS - apparent cardiopulm arrest. On arrival.
	A - O ₂ @ 4g @ pool & secretions Procedure Ord ETT
10/10/22	B - O ₂ spm resp (BVM initiated) Induc: scap arrest
8/9/23	C - O ₂ pulse (CPR initiated) Proc: 3-0 Mac - good
10/29	D - GCS 3 Pupils 3mm + fixed ETT passed easily
	② vs ③ secured @ teeth
5 PM	Pt was intub placed on monitors, CPR initiated, IV x 2 placed
	Airway secured - 7-0 ETT - complication. BVA - ⑬ vs.
	Monitor showed VTach (O ₂ pulse) so tube 200-300-310
	Epi 1mg / atropine 1mg given IV.
	CPR until then. Repeated defib @ 360 performed.
	Lidocaine 100mg IV, 1 amp bicarb IV
	Fem stick for blood done + E-sint performed. Ax Temp 104°
	Cardiac v/s x 2 performed - O ₂ cardiac motion.
	At 1719 pt was in agonal rhythm v/s showed O ₂ cardiac activity. O ₂ pulse. O ₂ spm resp Pupils fixed + dilated.
	Code called @ 1719.
	Presumed cause of death cardiopulmonary arrest.

b6 4
b7c-4



SPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	
PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)		REGISTER NO.	WARD NO.

EPW
#0352808

Admin Law Control Sheet

ID	Date received	Action	Name/Unit
12		CDRS inquiry	1st BDE
Summary	Attorney	Status	
Translator missing items		Sent back to bde(see DA 200)	
Date Completed			

FILE COPY

Date Recd

Received by/dare



(b)(6)-4

(b)(7)(C)-2

TRANSMITTAL RECORD

For use of this form, see AR 25-50; the proponent agency is DCSPER

1. SECURITY CLASSIFICATION

2. SHIPMENT NO.

3. TITLE/FILE IDENTIFICATION

Cdr's Inquir

4. AS OF DATE (YYYYMMDD)

20020717

5. SHIPMENT DATE (YYYYMMDD)

20020717

6. AUTHORITY FOR SHIPMENT

7. NUMBER OF RECORDS TRANSMITTED

1 Packet

8. PERSON TO CONTACT (Name and telephone)

9. REQUIREMENT CONTROL SYMBOL (AR 335-15)

10. SHIPPED FROM

11. SHIPPED TO

1Bde LNO

RETURN RECEIPT REQUESTED (When box is checked, sign below and return copy to sender.)

10a. TYPED NAME AND TITLE OF SENDER

(b)(7)(c)-2
(b)(6)-2

11a. TYPED NAME AND TITLE OF RECEIVER

(b)(7)(c)-2
(b)(6)-2

10b. SIGNATURE OF SENDER

11b. SIGNATURE OF RECEIVER AND DATE

12. TYPE OF MEDIA TRANSMITTED

<input checked="" type="checkbox"/> HARD COPY	<input type="checkbox"/> PUNCHED CARDS	<input type="checkbox"/> CASSETTES
<input type="checkbox"/> MICROFILM	<input type="checkbox"/> PHOTO	<input type="checkbox"/> FICHE

13. NUMBER OF BOXES (Packages)

14. NUMBER OF ITEMS

15. METHOD OF SHIPMENT

<input checked="" type="checkbox"/> COURIER	<input type="checkbox"/> FIRST CLASS	<input type="checkbox"/> PARCEL POST
<input type="checkbox"/> EXPRESS MAIL	<input type="checkbox"/> REGISTERED	

16. SPECIAL INSTRUCTIONS

17. TYPE COMPONENT USED (For magnetically recorded data)

18. REMARKS

Cdr's Inquir for 151Bde
- Ticket University Translator Missing
Personal Items - 6524103

6341

DEPARTMENT OF THE ARMY
HEADQUARTERS AND HEADQUARTERS COMPANY
1ST BRIGADE, 4TH INFANTRY DIVISION
TIKRIT, IRAQ APO AE 09323

AFYB-IN-S6

6 July 2003

MEMORANDUM FOR COMMANDER, 1st Brigade, 4th Infantry Division

SUBJECT: Commander's Inquiry – Tikrit University Translator Missing Personal Items

1. Summary of Findings. At the time this particular incident happened, procedures for detainee handling were not well-defined. Sloppy accountability of detainee personal property appeared to be the norm until several complaints put more focus on the problem. Within days of this Tikrit University raid on 27 May, new procedures were put in place to ensure proper tracking of detainees and their personal property. The current procedures noted during this inquiry appear to be well within standard and are being adhered to. There was no evidence of any kind that pointed to a specific person's wrong-doing but rather a series of events that led to the loss of accountability of these personal items.

2. Background. On 28 May, 2003 the 1st Brigade, 4ID conducted a raid to detain individuals suspected of conducting subversion and espionage against U.S. forces. There were two groups of detainees this day: one group detained at the university and another group who worked as translators at the 4th Infantry Division Civil Military Operations Center (CMOC) located at the main palace complex. This particular inquiry focuses on the translators who were detained once they arrived to work at the CMOC. They were screened at the CMOC and moved to the 1BCT holding cell for two days and then to the division holding cell for 6 days. In the process some of their personal belongings were taken and never returned. My findings are based on a series of exhibits which include Division and Brigade-level fragmentary orders and interviews with soldiers and Iraqi civilians involved.

3. References:

- a. Email from 1BCT Legal, subject "Missing Property", dtd 241156DJUN03. (Exhibit A)
- b. TF IH FRAGO 122 (STORAGE AND SECURITY OF HIGH VALUE, PILFERABLE ITEMS) TO TF IH OPOD 03-05/IV (REGIME REMOVAL) DTD 252330ZAPR03. (Exhibit B1)
- c. 1BCT FRAGO 36 (DETAINED PERSONS/CIVILIAN INTERNEES RELEASE PROCEDURES) TO 1BCT OPOD 03-04-II (RAIDER STRIKE 2) DTD 280300ZAPR03 (Exhibit B2)
- d. TF IH FRAGO 592 (INTERNMENT AND DETENTION OPERATIONS AND CG DIRECTED ASSESSMENT) TO TF IH OPOD 03-05/IV (REGIME REMOVAL) DTD 042346D03. (Exhibit B3)
- e. TF IH FRAGO 867 (HANDLING OF PERSONAL PROPERTY) TO TF IH OPOD 03-05/IV (REGIME REMOVAL) DTD 042215DJUL03. (Exhibit B4)

4. Names of Complainants and alleged missing personal property:

- a. [REDACTED] - 130,000 ID (had 40,000 ID returned)
- b. [REDACTED] - 2003 diary; Arabic-English dictionary; 30,000 ID
- c. [REDACTED] - 2001 diary; Oxford English dictionary; \$29; 230,000 ID (had 100,000 ID and \$20 returned)
- d. [REDACTED] - 3 books; 30,000 ID (had \$210 returned)
- e. [REDACTED] - 3 CDs; 110,000 ID

(b)(6)-4
(b)(7)(C)-4

5. During the scope of this inquiry, the following personnel were interviewed:

- a. [REDACTED] at Division CMOC - 27 June (Exhibit C)
- b. [REDACTED] 720 MP Battalion - 27 June (Exhibit D)
- c. [REDACTED] 411 MP Company - 27 June (Exhibit D)
- d. [REDACTED] at Division CMOC - 28 June (Exhibit E)
- e. [REDACTED] at Division CMOC - 28 June (Exhibit F)
- f. [REDACTED] - 28 June (Exhibit G)
- g. [REDACTED] - 2 July / 4 July (Exhibits H, L)
- h. [REDACTED] holding cell NCO - 2 July (Exhibit I)
- i. [REDACTED] holding cell NCO - 2 July (Exhibit J)
- j. [REDACTED] holding cell soldier - 2 July (Exhibit J)
- k. [REDACTED] - 2 July (Exhibit K)
- l. [REDACTED] - 2 July (Exhibit M)
- m. [REDACTED] - 4 July (Exhibit M)
- n. [REDACTED] THT 24 - 4 July (Exhibit N)
- o. [REDACTED] THT 32 - 4 July (Exhibit O)
- p. [REDACTED] THT 20 - 5 July (Exhibit P)
- q. [REDACTED] translator - 6 July (Exhibit Q)
- r. [REDACTED] translator - 6 July (Exhibit R)

(b)(6)-4
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(b)(7)(C)-4
(b)(6)-4

6. Findings. On 27 May, 2003 the 1BCT conducted a raid which involved several members of the staff of Tikrit University. There were two groups detained this day which has led to some confusion during the gathering of statements and details. The fact that these raids occurred five weeks ago and that the two groups were both labeled by many as "Tikrit University professors" has caused some inconsistencies in the statements and has caused this investigating officer to decipher in some cases which information is specific to the "Tikrit University translators".

The CMOC personnel have received many complaints since opening the CMOC and believe that Iraqi personal property is being lost by U.S. forces either due to theft or mismanagement of property. In this specific case, the translators worked for them and there was a bond and trust established. CMOC personnel assisted in placing the personal articles (mostly books, dictionaries, and CDs) in white plastic bags. The 411th MP [REDACTED] and CMOC personnel both admit that there was no inventory or paperwork done to account for these items (Exhibits E, F and G). A confusing piece of this investigation was that [REDACTED] remembered giving the white bags of personal items to the CI teams to examine for intelligence value yet the CI teams both say they never were provided such items (Exhibits G, M, and N). Either way they both admit no wallets or money were seized at this time.

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(b)(7)(C)-4

(b)(6)-4
(b)(7)(C)-4

The detainees departed the CMOC approximately 1700 enroute to 1-22IN/1BCT holding cell. Detainees were searched by [redacted] (1-22IN [redacted]) and rings, watches, and "wallets" were placed in an MRE pouch with the detainee's ID number written on the pouch. The 1-22IN Mortar platoon soldiers use the word "wallet" but the complainants say they did not have wallets but instead just wads of money (Exhibits J, Q, and R). [redacted] does remember the white bags but describes them more as a consolidated bag without anything distinguishing the items to match them up with a specific detainee (Exhibit J). However, once again there was no paperwork done while transferring this property and the complainants statements match this administrative oversight (Exhibits Q and R). He admits that he provided the white bags and the MRE box full of pouches to the CI team who was using a small building outside the holding area. Once again no paperwork was done during this transfer. As per [redacted] statement the CI teams left the bags, box and pouches unsecured when they were done screening and [redacted] took the items back under his control. The items spent the night next to his bed which was at that time in the platoon CP/radio room - a room manned 24 hours a day.

After a few days the items were provided to the S2 and then passed onward to the division holding area to link up with the detainees. Once again there was no paperwork done at this time to track the movement of these items. The detainees' statements to match that the MRE pouches did transfer to division since once they were released they mention opening their MRE pouches to retrieve most of their items (Exhibits Q and R).

The Mortar Platoon mentioned to me that many others had questioned them about missing items before [redacted] had been told of missing items a few days after this raid and had his own investigation going on. At some time after the detainees were dropped off the 411th MP Company returned to drop off a white plastic bag left in one of their vehicles of the mortar platoon recalls that in that bag was found 2-3 items on [redacted] list [redacted] also did an unannounced platoon inspection which turned up nothing unusual and his section were very eager to answer my questions in hopes of clearing their name. They explained they were grateful for the new procedures to help them show they are doing a professional job and not involved in any wrongdoing.

To the best of my ability I was able to determine the chain of custody of the detainees property as:

- CMOC personnel take some interpreter items at the division CMOC (white/clear bags)
- 411 MP Co at CMOC transport items to 1BCT cell (white/clear bags)
- 1-22IN [redacted] at 1BCT holding cell; also takes watches, rings, "wallets" for MRE pouch
- CI team at 1BCT holding cell
- [redacted] at 1BCT holding cell (finds items unattended in "interrogation shack")
- 1-22IN S2
- Division holding cell
- Interpreters (never sees the white/clear bag items but does receive most of the MRE pouch items)

All these transfers occurred without any inventory or supporting documentation reference personal items belonging to the detainees. All those inventoried were very aware of the DA Form 4137 "Evidence/Property Custody Document" but all admit that during this early part of

the operations in theater the procedures were still very loose. At any time it is possible that an item or items were not present from one transfer to another.

Division FRAGO 122 is dated one month prior to this day's raids and tasks G4 to "provide guidance for storage and accountability of high value items. POC [redacted]." Brigade FRAGO 36 is a few days later and states in paragraph 3.C.5.A.3 "store and give receipt for any property confiscated." Division FRAGO 592 dated 4 June states "units must account for each captive and his equipment when they arrive at the forward collection point." Much later on 4 July Division FRAGO 867 states "For all property seized, complete DA Form 4137 (Appendix A) to track the items from origin to storage facility...when seizing property from an individual, provide a copy of the DA Form 4137 to the individual..." (Exhibits B1, B2, B3, and B4). There may be some other FRAGOs whose titles did not catch my eye but the trend here shows very broad guidance early on about "providing receipts" when taking property. Then it appears the division realized it needed to provide stricter guidance and provided more detail as to exact forms and procedures for soldiers to follow.

(b)(6)-4
(b)(7)(C)-4

On 27 May, 2003 it appears to me that basic hand receipt accountability was not adhered to until guidance from higher forced the use of the DA Form 4137. Today's procedures seem to be much more tightly controlled with paperwork tracking ensuring a proper chain of custody.

[Large redacted block]

b(5)-1
deliberately
process

[Redacted signature]

MAJ, SC
1BCT S6

(b)(6)-2
(b)(7)(C)-2

4ID 1BCT S6

From: 4ID 1BCT LEGAL
Sent: Tuesday, June 24, 2003 8:56 PM
To: 4ID 1BCT S6
Subject: FW: Missing Property

Importance: High

Sir:

The email that started it.

Raiders:

[Redacted]

} (b)(6)-2
(b)(7)(C)-2

-----Original Message-----

From: 4ID SJA
Sent: Saturday, June 14, 2003 03:31
To: 4ID 1BCT LEGAL
Subject: Missing Property
Importance: High

[Redacted]

(b)(6)-4 (b)(7)(C)-4

The CMOC has received a credible complaint regarding the failure to return property after apprehension and placement in the 1BCT confinement facility. According to [Redacted] the MP LT who apprehended the translators at the CMOC remembers dropping them off with property at 1BCT. The DCCP claims the property was not transferred to them.

} (b)(6)-4
(b)(7)(C)-4

To make matters worse, when [Redacted] called the 1BCT Confinement [Redacted] to see if he had the property, [Redacted] told [Redacted] it was not his responsibility to keep track of property. Huh?

} (b)(6)-4
(b)(7)(C)-4

[Redacted]

[Redacted]

130,000 ID
Diary of 2003, Arabic English Dictionary, 30,000 ID
Diary of 2001, Modern Oxford English Dictionary, \$29.00; 230,000 ID
- 3 books, 30,000 ID (they returned a separate \$210.00)
110,000, 3 CDs

} (b)(6)-4
(b)(7)(C)-4

b(s)-1
deliberative
process

Please advise.

fdd

6346

EXHIBIT C [REDACTED] INTERVIEW)

(b)(7)(C)-4
(b)(6)-4

27 June 2003. Location: Division CMOC. Has a strong feelings that many of his local contacts have been mistreated or apprehended without proper cause. It has forced many of them to quit or to be afraid to work with US forces. [REDACTED] told me that there is one interpreter who is still in contact with the team after the 27 May apprehension.

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(b)(6)-4

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[REDACTED] had saved money to go that day to Baghdad to purchase a washing machine and that money was taken and never returned. He was detained for 7 days. All interpreters had dictionaries as well. When asked if anything was given back he told me that their watches were returned. He also mentioned [REDACTED] had his house in Al Ouja raided and \$35K removed and never returned. These are educated men who have even said "you wouldn't do this in the United States" reference taking property from detainees and never returning. Recommends I talk to [REDACTED] (speaks VERY highly of this man) and [REDACTED]

(b)(7)(C)-4
(b)(6)-4

(b)(6)-4

(b)(7)(C)-4

EXHIBIT D (720th MP INTERVIEWS)

27 June 2003. Location: 720th MP HQ.

-talked to the [REDACTED] who was unable to verify that any personal property from detainees has come up missing. His unit mission does not deal with personal property but rather the handoff of detainees to the 1BCT detention cell.

[REDACTED] from [REDACTED] OPS Cell of 411th MP Co

This interview was later deemed to be of no value because [REDACTED] account below relates to a different group of University detainees - not the ones for the scope of this inquiry.

-27 May events. His purpose was to set up an LZ in support of the raid. His mission was to transport detainees in the back of a M998 to the detention cell. Prepositioned his team in support of 64th MP Co and stayed with his vehicle by the main entrance. The first action was a supposed VP/dean who was escorted by 2 soldiers. He was padded down and put in the back of the HMMWV. He was handcuffed but not blindfolded. [REDACTED] and [REDACTED] were present. After a while he was told to move the vehicle around to a different doorway. [REDACTED] provided cravats to blindfold the detainees. 2x M998s with about 10-16 detainees total. Driven to 1-22IN holding cell. Remembers [REDACTED] from 411th escorted the detainees. [REDACTED] was in the other M998. Remembers a [REDACTED] (C) soldier at the 1-22 holding cell but not his name. They segregated the president and vice president from the other detainees. [REDACTED] did NOT see any personal property transported or taken by anybody throughout his participation. This was his only mission so he can has no information pertaining to this inquiry. Does NOT know of any other soldiers who would have information that would be useful to me for this investigation.

(b)(6)-4

(b)(7)(C)-4

(b)(7)(C)-4
(b)(6)-4
EXHIBIT E (██████████ INTERVIEW) (b)(7)(C)-4
28 June 2003. PHONECON to Division CMOC.

██████████ Night prior he was told this screening would happen. CMOC invited them all in so CI could talk with them. 7 from this pool were detained by CI and taken to 1BCT detention. ██████████ with 720th MPs was the ██████████ at the scene. He recalls they had books, dictionaries, 3 CDs. ██████████ and ██████████ personally placed these items in white/semi clear plastic bags. No money was placed in the bags. No inventory was taken at this moment. Those bags were given to E5/SGT of the MPs. They were released from U.S. custody 7 days later. Interpreter, ██████████ returned back and was visibly shaken up. He announced of the 7 detainees, 5 had items taken and not returned. It was possible that the other two may have had their belongings returned. Once ██████████ heard they were still being held he went to the holding cell to meet with them to ensure they were alright. It was 3 days after the screening at the CMOC that he visited and talked to ██████████ but nothing was mentioned at that time of any missing personal belongings. ██████████ wanted the interpreters to know that he was doing what he could to help their situation. Since this event, only ██████████ has come back to discuss the problem of missing property. ██████████ has heard many complaints pointing fingers at 1st and 2d BCT holding cells losing/misplacing detainee personal property. (b)(7)(C)-4
(b)(6)-4

EXHIBIT F (SFC ██████████ INTERVIEW)

██████████ was present with ██████████ After the CI screening the detainees stood for flex cutting. At that point it was identified that they had books, translation items, pads, pens, etc. ██████████ got some bags to put these items in. Any one who had an item had their own bag. ██████████ carried all the bags out of the building handed off to MP SGT/E5. All of these items drove away with the MPs and detainees. He recalls that detainees were in one vehicle and the personal items in the other vehicle. He recalls the MP team consisted of a ██████████ LT, SGT/E5 and a SPC. No property was catalogued at the division CMOC by anybody.

EXHIBIT G (██████████ INTERVIEW) (b)(6)-4 (b)(7)(C)-4

28 June 2003. PHONECON with 411th MP Co. ██████████
██████████ from her platoon went to CMOC to detain university workers who were to arrive that morning. When the interpreters first arrived they were put in a main room and then individually interviewed by CI teams. Her team would pad down and show items to the CI teams to see if it was of any intelligence value. To her knowledge all items were given back to the individuals at that time. The CI teams decided who was to be detained and who was to be released. At that time items were taken from those to be held but no forms were on hand. She remembers university books, dictionaries, and personal notebooks. ██████████ remembers allowing them to keep their wallets. She did not have any DA Form 4137s at that time but items were put in white bag and moved with the detainees. To her recollection there was no money put in any of the white bags. When they showed up at the 1BCT detention cell they handed over the white bags to 1BCT personnel and explained that there was no paperwork yet done. The 1BCT team said they would take care of it. The inventory was not done in front of her. She does not recall the name of the person at the detention cell that day. Her team has done drops to 1BCT cell many times and it can be any one of a number of soldiers who will be on shift. She remembers one bag being found later and that bag was brought to the holding cell. She does not recall what the items were that were in that bag. Normally paperwork is filled out. Does not recall any bad situations in dealing with 1BCT holding cell. Nothing of financial value was in the white bags. (b)(6)-4
(b)(7)(C)-4

given to 1BCT. [REDACTED] does not know what 1BCT does with the property once detainees and property are handed off.

EXHIBIT H ([REDACTED] PHONECON)

2 July, 2003. PHONECON with 1-22IN [REDACTED]

[REDACTED] says they came to the holding cell after 6pm so [REDACTED]. Articles would have been given to [REDACTED]. DA Forms 4137 and 2823 did not come in to effect until a division frago mandated a few days later. Prior to that, items were collected and written on his tag. There are some items that were taken from a raid that netted #4 but no property from drop-offs is still on hand. [REDACTED] will look thru the log and find out who was on shift that day and have them write up statements as to how that hand-off went with 720th MPs and if any personal items were collected.

[REDACTED] INTERVIEW- 3 JULY

Was around that day but does not recall any white garbage bags with personal items in it. He remembers a group of 12 and that [REDACTED] was looking for a black organizer, a women's purse, and a watch. He did not recall seeing any money brought in to the holding cell but knew there were wallets. (b)(6)-4

[REDACTED] called after looking up the names I provided and tells me the detainees were held from 29 May thru 3 June and they were delivered by 104MI. In checking with [REDACTED] of 1BCT S2 he feels that it would be strange for 104MI to be the unit credited with dropping off EPWs. It should be a maneuver unit who captured and tagged the individual. (b)(7)(c)-4

EXHIBIT I ([REDACTED] INTERVIEW)

3 July 2003. He is one of the [REDACTED] of the holding cell and watches over them once they are inside. He is not involved directly with the hand-off from the MPs or the delivering unit. He showed me how they use MRE pouches to put detainee personal belongings in and then label with the detainee number. Then the MRE pouch is placed in an MRE cardboard box. Items are annotated on the DA Form 4137 and then that paperwork is placed inside the MRE pouch. When asked about his receiving of the detainees and the white/clear garbage bags from the MPs he said he did not recall any bags of that type. It is common practice that his team will remove belts, rings, wallets, and watches from the detainees once they arrive to the holding cell. The CI team will interrogate the detainee and they are provided the MRE pouch with the detainee number on it to determine if the objects lead to any questions. The DA Form 4137 was not used during this raid - it wasn't until a few days later in early June that the standards became very strict and the process was tracked with detailed paperwork. [REDACTED] did not recall any of the detainees names nor the names of the MPs who dropped them off. He did not see any money out in the open. He showed me his log matching name, detainee number, date in and date out but that did not start until 4 June so the names in question were not logged.

EXHIBIT J [REDACTED] AND [REDACTED] INTERVIEW)

3 July 2003. [REDACTED] is another NCO in the holding cell process but was not yet on board at the time of this specific detaining. He was able to explain to me the current processes which matched SGT [REDACTED] explanation.

A soldier of [REDACTED] He was the actual soldier who received the detainees and searched them removing their watches, rings, and wallets and placed them in MRE pouches with a matching detainee number. He did not ever look inside the wallets nor did he fill out any paperwork listing the items. He does remember the clear garbage bags provided by the MPs but said they were all bunched up and had multiple people's items in one bag - there was nothing identifying which bag belonged to which person. He said there was a special CI team there that day and not one he was used to seeing. He remembered providing the bags to the CI team to look thru as well as the MRE box with pouches. The CI team used a separate building which was known as the "interrogation hut". He brought the items there. Usually afterwards the CI team or the S2 themselves would deliver the items to the S2 for further processing/analysis. Later, before going off shift he checked in the hut and found the box, pouches, and bags all laying about the table but no one was inside the hut. As best he could tell the same amount of bags and pouches were present but he has no idea if all the items from before. There was no paperwork so nothing to compare with. He also recalled "someone" returning with a missing garbage bag which cleared up some missing items from [REDACTED] list. When I asked him what he did with the box of MRE pouches and garbage bags he said it was late so he brought it back to his hootch and slept with it next to his cot. That same room housed the platoon CP so it was manned 24 hours and he figured it a safe place for the night. It took a few days but the box finally made it up to [REDACTED] in the Bn S2 [REDACTED] was the [REDACTED] then and now commands a company.

(b)(6)-4
(b)(7)(c)-4

EXHIBIT K [REDACTED] INTERVIEW)

3 July 2003. [REDACTED] He does in fact remember clear garbage bags with books and CDs and also remembers a computer tower. He remembers one large consolidated bag, not a bunch of smaller bags. Recalls several days later a vehicle returning with a missing bag that had some items in it that [REDACTED] was looking for. [REDACTED] list had 4 items and [REDACTED] personally looked in the bags and found 2 or 3 of those [REDACTED] items. The items were given to [REDACTED] [REDACTED] remembered calling [REDACTED] to tell him there were still items from the university detainees that had not been picked up. It took 4-5 days before the Mortar section decided to bring the items themselves up to the S2.

After hearing that many items were coming up missing, [REDACTED] conducted his own inspection without telling any of his soldiers what he was looking for. They dumped rucks and checked the entire building and found nothing. No large amounts of money nor was anything out of the ordinary found or anything found in strange places (ie. socks, etc).

EXHIBIT L ([REDACTED]) PHONECON

4 July 2003. [REDACTED] (1-22IN [REDACTED]) Does not recall who the CI team was that day but would look it up. He checked on the names of the complainants and remembers that the same night this group arrived at 1-22IN holding cell they were taken to the division cell. He did not recall any accompanying bags. However, mortars platoon brought another box to the S2 a few days later. The division drop was with detainees and the MRE bags with personal items. No 4137 was done. Remembers BDE FRAGO 158 creating new rules and chain of custody in effect when dealing with detainees. Division did not do DA Form 4137 at this time. Does not recall any money in bag provided to division. He believes the mortar section does a good job and has not taken any detainee property.

EXHIBIT M ([REDACTED]) INTERVIEW

4 July 2003. 1400- talked to [REDACTED] to find out which CI teams were involved with this event. He informed me that [REDACTED] and [REDACTED] conducted the CMOG screenings that day. [REDACTED] is a division DS team and is currently collocated with 4-42FA.

EXHIBIT N ([REDACTED]) INTERVIEW

4 July 2003. 1730- She did conduct screenings at the division CMOG but never came in contact with any personal items. She filled out the CI screening sheet and MPs filled out EPW tags. Believes that the detainees drove away approximately 1700 that day. Was not aware of anyone involved with any wrongdoing.

EXHIBIT O ([REDACTED]) INTERVIEW

4 July 2003. 1800 - He conducted his screenings upstairs at the division CMOG building while many were held downstairs in the big room. He operated in a different room than THT 24. MPs brought the detainees up and he recalls looking at some paperwork provided by the CMOG personnel from the translators personnel file. There were some pictures and personal info provided by the CMOG S2 team for employee records. He never handled or saw any personal items of the detainees.

EXHIBIT P ([REDACTED]) INTERVIEW

July 5, 2003. 1630- When asked if he was involved in the screening during the Tikrit University raid he said he was at the 1BCT holding cell for the daytime only which allowed him to screen the group that came directly from the university. However, he was not on hand for the evening arrival of the translators. I asked him if he ever saw white garbage bags with personal belongings and he said he did not. He admitted that he often has problems with the chain of custody of property and even the "capture tags" needed to be filled out by him on many occasions. [REDACTED] admitted that back then procedures were very lax.

(b)(6)-4
(b)(7)(C)-4

EXHIBIT Q ([REDACTED]) INTERVIEW)

6 July, 2003. 1700. Met [REDACTED] at the Division CMOC. He described his day starting with his arrival at the CMOC and being made to wait in the big room on the first floor until called forward to be screened. Nobody took any of his belongings until after the screening. At that point, someone took his Modern Oxford Dictionary English-English and his black day planner and put it in a shopping bag but he does not recall the name of the logo on the bag. He was tagged with Q6 he recalls and that was put on his shirt. He was flex cuffed with hands behind his back and eventually taken with 6 others to a holding cell. Once delivered, his belt, watch, wad of money, and ring were taken and put in an MRE pouch – no receipt was provided to him. He recalls having 330,000 Iraqi Dinar and \$49. The same night he was taken to the first holding cell they were all taken to another holding cell (presumably the division holding cell) where they waited for 5 minutes and then were loaded back up and returned to the first holding cell (presumably the 1BCT cell). He believes there was some confusion by the guards as to who they were because once they were identified as interpreters that seemed to trigger their return back to the first holding cell. The other university professors were already at the division holding cell. Two days later the group was taken back to the division holding cell. They were being yelled at and paper tags were placed on them and in the process a soldier in a brown t-shirt slipped some Iraqi Dinar in his left breast pocket – later identified as 100,000 ID. After being interrogated and found of no value on day 8, he was provided his MRE pouch and released. In the pouch was his watch, belt, and \$20. He was still missing 230,000 ID and \$29. He showed me a wad of ID in his pocket and explained that even 100,000 ID is too thick to put in a wallet so it is carried folded in the pocket. Made perfect sense to me once I saw how thick the "wad" was. He values his dictionary at \$7 and his day planner at \$10 but is certainly upset to have lost all of his contact information, calendar entries, etc. When asked to identify his day planner he said it was black with all the writing on the inside in English. [REDACTED] drove him home early on the morning of his release.

(b)(6)-4
(b)(7)(c)-4

EXHIBIT R ([REDACTED]) INTERVIEW)

6 July, 2003. 1730. Describes similar CMOC experience as [REDACTED] with his black notebook put in a bag but nothing else taken until arriving at the first holding cell. There he had his pen, watch, and money (170,000 ID; no wallet) put in an MRE bag – no receipt was provided. He remembers the round trip on the first night to the second holding cell. Two days later they were sent to the second holding cell (division holding cell) again. He recalls a female soldier filling out a small piece of paper and pinning it on his left breast pocket. With his eyes to the ground, he felt someone put something in his left breast pocket which later turned out to be 40,000 ID. Other detainees asked him and the other interpreters to read what it said on their pocket tags and he remembers that it listed personal items like watches and rings. However, when they looked at their own (the interpreter) tags that area was blank. When he left at 0600 on day 8 he was handed an MRE pouch and he recovered his belt and watch but there was no money. He is missing 130,000 ID.



DEPARTMENT OF THE ARMY
HEADQUARTERS 4TH INFANTRY DIVISION (MECHANIZED)
OFFICE OF THE STAFF JUDGE ADVOCATE
FORT HOOD, TX 76544-5000

REPLY TO
ATTENTION OF:

AFYB-JA-AL

06 September 2003

MEMORANDUM FOR COMMANDER, 4th Infantry Division (Mechanized), Fort Hood, Texas 76544

SUBJECT: AR 15-6 Investigation – Legal Review

1. In accordance with AR 15-6, paragraph 2-3, I have reviewed the AR 15-6 investigation into the 16 August death of an detainee, [REDACTED], detainee [REDACTED]. I make the following determinations:

AR 15-6-4

- a. The proceedings comply with the legal requirements.
 - b. Errors in the proceedings, if any, do not have a material adverse effect on any individual's substantial rights.
 - c. Sufficient evidence supports the findings.
 - d. The recommendations are consistent with the findings.
2. The investigation is legally sufficient.
 3. The point of contact is the undersigned, (DNVT) 534-[REDACTED]

(b)(6)-2

CPT, JA
Administrative Law Attorney

(b)(6)-2

6353

DEPARTMENT OF THE ARMY
HEADQUARTERS, 3RD BRIGADE COMBAT TEAM
4TH INFANTRY DIVISION (MECHANIZED)
Balad, Iraq

AFZC-FC-BSO

27-Aug-03

MEMORANDUM FOR CHIEF OF STAFF, 4TH INFANTRY DIVISION

SUBJECT: 15-6 Investigation Findings and Recommendations of the death of detainee,
[REDACTED]

b6-4
b7c-4

1. The purpose of this memorandum is to determine the circumstances surrounding the cause death of [REDACTED]

2. Findings:

b6-4
b7c-4

(a) On the 07 Aug 03 A Co, 1/8 IN BN conducted a raid on a house, and detained a suspected arms dealer, [REDACTED] with 38 x AK-47s, 5 SKS, 1 x Tariq pistol, 5 x RPGs, 3 x Enfield rifles, 1 x Dragunov sniper rifle, and 2 x RPG sights. [REDACTED] [REDACTED] unprocessed at the detainment facility on 09 August 2003.

b6-4
b7c-4

b6-4, b7c-4

(b) [REDACTED] served in the Iraqi Army from 1978-1980 as an infantry private.

b6-4, b7c-4

(c) [REDACTED] was 44 years of age.

b6-4, b7c-4

(d) [REDACTED] was held a POW for eight years during the Iran/Iraq War in Iran.

b6-4, b7c-4

(e) [REDACTED] was medically evaluated until 13 August 2003. The results of the screening found the detainee appeared to be nauseous, pale, weak, and unable to keep any food in his stomach. There were no signs of injury or that the detainee was taking any medication. The [REDACTED] medic, gave him IV fluids and planned to follow up the next day. Also [REDACTED] noticed the fact he was being carried by his brothers for role call.

(b)(6)-4 / (b)(7)(C)-4

(f) 15 Aug 03 the detainee was again treated for dehydration and nausea. The medic gave him a liter of Gatorade, rehydration salts, and Mylanta. The medics stated that they would return the following [REDACTED] for a follow on the detainee.

6354

(g) The detainment facility provides two MREs per day and water from a water buffalo is readily available for the detainees. The detainment facility also allows the detainees to wash off in a shower every two days. The detainment facility, which is a large open hanger, provides adequate airflow and shade for the detainees.

(h) The detainment facility conducts hourly role call for all detainees.

(i) Most of the detainment facility personnel are either CLS, CPR, and some are EMT certified, but there is not a medic permanently on site. The medics from 64th MP BN conduct the medical screening of all the detainees.

(j) The medic does not visit the detainment facility unless requested. The facility also does not have a nonstandard casevac vehicle on site. The medic from 64th MP BN are located on Samara East Airfield within five minutes of the detainment facility.

(k) The investigation shows that on the day of detainee death that all personnel involved reacted well and provided adequate medical assistance during the incident.

(l) The 3/29 FA BN PA and medics visit the detainment facility daily since the incident occurred.

3. Recommendations:

(a) That the medic needs to evaluate detainees no less than 24hrs after arrival at the detainment facility.

(b) Detainees need to be forced to hydrate while in the detainment facility and also the personnel on shift at the detainment facility need to monitor the hydration.

(c) Provide humanitarian assistance meals or food purchased on the local economy which will meet their diet.

(d) A medic needs to be added to the detainment facility team.

4. POC is undersigned at 534- [REDACTED]

b6-2
b7c-2

[REDACTED]
CPT, SC
Brigade AS6

b6-2 / b7c-2



DEPARTMENT OF THE ARMY
HEADQUARTERS TASK FORCE IRONHORSE
TIKRIT, IRAQ

REPLY TO
ATTENTION OF

AFYB-CG

18 August 2003

MEMORANDUM FOR: [REDACTED] HHC 3BCT

SUBJECT: Appointment as a 15-6 Investigating Officer

1. You are hereby appointed an investigating officer pursuant to AR 15-6 and AR 210-7, paragraph 4-3, to conduct an informal investigation into the 16 August death of an Iraqi detainee, [REDACTED]. Specifically, you will determine the facts and circumstances surrounding the cause of death. Additionally, you are to identify any systemic problems that the command can address and correct, if necessary.

b6-4
b7c-4

2. You will use informal procedures under AR 15-6, Chapter 4. You will make specific findings and recommendations on all relevant issues you identify in the course of your investigation. If, during your investigation, you suspect that persons you intend to interview may have violated any provision of the Uniform Code of Military Justice (UCMJ) or any other criminal law, you must advise them of their rights under the UCMJ, Article 31, or the Fifth Amendment, as appropriate. Rights warnings and waivers will be documented on DA Form 3881. All witness statements will be sworn and recorded on DA Form 2823.

3. Before proceeding with the investigation, contact [REDACTED], 4ID DMAIN, OSJA, at 534 [REDACTED] for an initial legal briefing. [REDACTED] will serve as your primary legal advisor.

b6-2

b6-2

b6-2

4. Your report, together with all evidence marked as exhibits, will be submitted to me in memorandum format no later than ten days from the date you receive this memorandum. Submit any requests for delay to me either orally or in writing. You will obtain a written legal review prior to submitting the completed investigation.

FOR THE COMMANDER:

[REDACTED]

b6-2

/COL, GS
Chief of Staff

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TABLE OF CONTENTS

TAB A. Appointment Orders.

TAB B. DA Form 1574 (Report of Proceedings by Investigating Officer).

TAB C. DA Form 2823 (Sworn Statements) and Privacy Act Statement:

- b6-4 / b7c-4
- Exhibit A: [REDACTED] Sworn Statement and Privacy Act Statement.
 - Exhibit B: [REDACTED] Sworn Statement and Privacy Act Statement.
 - Exhibit C: [REDACTED] Sworn Statement and Privacy Act Statement.
 - Exhibit D: [REDACTED] Sworn Statement and Privacy Act Statement.
 - Exhibit E: [REDACTED] Sworn Statement and Privacy Act Statement.
 - Exhibit F: [REDACTED] Sworn Statement and Privacy Act Statement.

TAB E. Detainee Case file from the Detainment Facility.

TAB D. Chronology of Actions Taken During Course of Investigation.

REPORT OF PROCEEDINGS BY INVESTIGATING OFFICER/BOARD OF OFFICERS

For use of this form, see AR 15-6; the proponent agency is OTJAG.

IF MORE SPACE IS REQUIRED IN FILLING OUT ANY PORTION OF THIS FORM, ATTACH ADDITIONAL SHEETS

SECTION I - APPOINTMENT

Appointed by Chief of Staff, 4th Infantry Division
(Appointing authority)

on 18 August 2003 (Date) (Attach inclosure 1: Letter of appointment or summary of oral appointment data.) (See para 3-15, AR 15-6.)

SECTION II - SESSIONS

The (investigation) (board) commenced at Samara East Airfield, Iraq at 0900
(Place) (Time)

on 19 August 2003 (Date) (If a formal board met for more than one session, check here : Indicate in an inclosure the time each session began and ended, the place, persons present and absent, and explanation of absences, if any.) The following persons (members, respondents, counsel) were present: (After each name, indicate capacity, e.g., President, Recorder, Member, Legal Advisor.)

The following persons (members, respondents, counsel) were absent: (Include brief explanation of each absence.) (See paras 5-2 and 5-8a, AR 15-6.)

The (investigating officer) (board) finished gathering/hearing evidence at 1730 on 21 August 2003
(Time) (Date)
and completed findings and recommendations at 0900 on 23 August 2003
(Time) (Date)

SECTION III - CHECKLIST FOR PROCEEDINGS

A. COMPLETE IN ALL CASES

		YES	NO ^{1/}	NA ^{2/}
1	Inclosures (para 3-15, AR 15-6)			
	Are the following inclosed and numbered consecutively with Roman numerals: (Attached in order listed)			
	a. The letter of appointment or a summary of oral appointment data?			
	b. Copy of notice to respondent, if any? (See item 9, below)	X		
	c. Other correspondence with respondent or counsel, if any?			X
	d. All other written communications to or from the appointing authority?			X
	e. Privacy Act Statements (Certificate, if statement provided orally)?	X		
	f. Explanation by the investigating officer or board of any unusual delays, difficulties, irregularities, or other problems encountered (e.g., absence of material witnesses)?			X
	g. Information as to sessions of a formal board not included on page 1 of this report?			X
	h. Any other significant papers (other than evidence) relating to administrative aspects of the investigation or board?	X		

FOOTNOTES: ^{1/} Explain all negative answers on an attached sheet.
^{2/} Use of the N/A column constitutes a positive representation that the circumstances described in the question did not occur in this investigation or board.

		YES	NO ^{1/}	NA ^{2/}
2	Exhibits (para 3-16, AR 15-6)			
	a. Are all items offered (whether or not received) or considered as evidence individually numbered or lettered as exhibits and attached to this report?	X		
	b. Is an index of all exhibits offered to or considered by investigating officer or board attached before the first exhibit?	X		
	c. Has the testimony/statement of each witness been recorded verbatim or been reduced to written form and attached as an exhibit?	X		
	d. Are copies, descriptions, or depictions (if substituted for real or documentary evidence) properly authenticated and is the location of the original evidence indicated?	X		
	e. Are descriptions or diagrams included of locations visited by the investigating officer or board (para 3-6b, AR 15-6)?			X
	f. Is each written stipulation attached as an exhibit and is each oral stipulation either reduced to writing and made an exhibit or recorded in a verbatim record?			X
	g. If official notice of any matter was taken over the objection of a respondent or counsel, is a statement of the matter of which official notice was taken attached as an exhibit (para 3-16d, AR 15-6)?			X
3	Was a quorum present when the board voted on findings and recommendations (paras 4-1 and 5-2b, AR 15-6)?		X	
B. COMPLETE ONLY FOR FORMAL BOARD PROCEEDINGS (Chapter 5, AR 15-6)				
4	At the initial session, did the recorder read, or determine that all participants had read, the letter of appointment (para 5-3b, AR 15-6)?			
5	Was a quorum present at every session of the board (para 5-2b, AR 15-6)?			
6	Was each absence of any member properly excused (para 5-2a, AR 15-6)?			
7	Were members, witnesses, reporter, and interpreter sworn, if required (para 3-1, AR 15-6)?			
8	If any members who voted on findings or recommendations were not present when the board received some evidence, does the inclosure describe how they familiarized themselves with that evidence (para 5-2d, AR 15-6)?			
C. COMPLETE ONLY IF RESPONDENT WAS DESIGNATED (Section II, Chapter 5, AR 15-6)				
9	Notice to respondents (para 5-5, AR 15-6):			
	a. Is the method and date of delivery to the respondent indicated on each letter of notification?			
	b. Was the date of delivery at least five working days prior to the first session of the board?			
	c. Does each letter of notification indicate -			
	(1) the date, hour, and place of the first session of the board concerning that respondent?			
	(2) the matter to be investigated, including specific allegations against the respondent, if any?			
	(3) the respondent's rights with regard to counsel?			
	(4) the name and address of each witness expected to be called by the recorder?			
	(5) the respondent's rights to be present, present evidence, and call witnesses?			
	d. Was the respondent provided a copy of all unclassified documents in the case file?			
	e. If there were relevant classified materials, were the respondent and his counsel given access and an opportunity to examine them?			
10	If any respondent was designated after the proceedings began (or otherwise was absent during part of the proceedings):			
	a. Was he properly notified (para 5-5, AR 15-6)?			
	b. Was record of proceedings and evidence received in his absence made available for examination by him and his counsel (para 5-4c, AR 15-6)?			
11	Counsel (para 5-6, AR 15-6):			
	a. Was each respondent represented by counsel?			
	Name and business address of counsel:			
	(If counsel is a lawyer, check here <input type="checkbox"/>)			
	b. Was respondent's counsel present at all open sessions of the board relating to that respondent?			
	c. If military counsel was requested but not made available, is a copy (or, if oral, a summary) of the request and the action taken on it included in the report (para 5-6b, AR 15-6)?			
12	If the respondent challenged the legal advisor or any voting member for lack of impartiality (para 5-7, AR 15-6):			
	a. Was the challenge properly denied and by the appropriate officer?			
	b. Did each member successfully challenged cease to participate in the proceedings?			
13	Was the respondent given an opportunity to (para 5-8a, AR 15-6):			
	a. Be present with his counsel at all open sessions of the board which deal with any matter which concerns that respondent?			
	b. Examine and object to the introduction of real and documentary evidence, including written statements?			
	c. Object to the testimony of witnesses and cross-examine witnesses other than his own?			
	d. Call witnesses and otherwise introduce evidence?			
	e. Testify as a witness?			
	f. Make or have his counsel make a final statement or argument (para 5-9, AR 15-6)?			
14	If requested, did the recorder assist the respondent in obtaining evidence in possession of the Government and in arranging for the presence of witnesses (para 5-8b, AR 15-6)?			
15	Are all of the respondent's requests and objections which were denied indicated in the report of proceedings or in an inclosure or exhibit to it (para 5-11, AR 15-6)?			

FOOTNOTES: ^{1/} Explain all negative answers on an attached sheet.
^{2/} Use of the N/A column constitutes a positive representation that the circumstances described in the question did not occur in this investigation or board.

		YES	NO ^{1/}	NA ^{2/}
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	b. Is an index of all exhibits offered to or considered by investigating officer or board attached before the first exhibit?	X		
	c. Has the testimony/statement of each witness been recorded verbatim or been reduced to written form and attached as an exhibit?	X		
	d. Are copies, descriptions, or depictions (if substituted for real or documentary evidence) properly authenticated and is the location of the original evidence indicated?	X		
	e. Are descriptions or diagrams included of locations visited by the investigating officer or board (para 3-6b, AR 15-6)?			X
	f. Is each written stipulation attached as an exhibit and is each oral stipulation either reduced to writing and made an exhibit or recorded in a verbatim record?			X
	g. If official notice of any matter was taken over the objection of a respondent or counsel, is a statement of the matter of which official notice was taken attached as an exhibit (para 3-16d, AR 15-6)?			X
3	Was a quorum present when the board voted on findings and recommendations (paras 4-1 and 5-2b, AR 15-6)?		X	
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	(1) the date, hour, and place of the first session of the board concerning that respondent?			
	(2) the matter to be investigated, including specific allegations against the respondent, if any?			
	(3) the respondent's rights with regard to counsel?			
	(4) the name and address of each witness expected to be called by the recorder?			
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	d. Was the respondent provided a copy of all unclassified documents in the case file?			
	e. If there were relevant classified materials, were the respondent and his counsel given access and an opportunity to examine them?			
10	If any respondent was designated after the proceedings began (or otherwise was absent during part of the proceedings):			
	a. Was he properly notified (para 5-5, AR 15-6)?			
	b. Was record of proceedings and evidence received in his absence made available for examination by him and his counsel (para 5-4c, AR 15-6)?			
11	Counsel (para 5-6, AR 15-6):			
	a. Was each respondent represented by counsel?			
	Name and business address of counsel:			
	(If counsel is a lawyer, check here <input type="checkbox"/>)			
	b. Was respondent's counsel present at all open sessions of the board relating to that respondent?			
	c. If military counsel was requested but not made available, is a copy (or, if oral, a summary) of the request and the action taken on it included in the report (para 5-6b, AR 15-6)?			
12	If the respondent challenged the legal advisor or any voting member for lack of impartiality (para 5-7, AR 15-6):			
	a. Was the challenge properly denied and by the appropriate officer?			
	b. Did each member successfully challenged cease to participate in the proceedings?			
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	a. Be present with his counsel at all open sessions of the board which deal with any matter which concerns that respondent?			
	b. Examine and object to the introduction of real and documentary evidence, including written statements?			
	c. Object to the testimony of witnesses and cross-examine witnesses other than his own?			
	d. Call witnesses and otherwise introduce evidence?			
	e. Testify as a witness?			
	f. Make or have his counsel make a final statement or argument (para 5-9, AR 15-6)?			
14	If requested, did the recorder assist the respondent in obtaining evidence in possession of the Government and in arranging for the presence of witnesses (para 5-8b, AR 15-6)?			
15	Are all of the respondent's requests and objections which were denied indicated in the report of proceedings or in an inclosure or exhibit to it (para 5-11, AR 15-6)?			
FOOTNOTES: 1/ Explain all negative answers on an attached sheet. 2/ Use of the N/A column constitutes a positive representation that the circumstances described in the question did not occur in this investigation or board.				

6359A

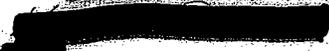
TASK FORCE IRONHORSE
HEADQUARTERS, 3rd BRIGADE COMBAT TEAM
BALAD, IRAQ

DATE: 24 Aug 03

b6-4 / b7C-4

I, , understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature 

Name: 

Rank: 

Unit: 647th MP CO

b6-4
b7C-4

SECTION VI - AUTHENTICATION (para 3-17, AR 15-6)

THIS REPORT OF PROCEEDINGS IS COMPLETE AND ACCURATE. (If any voting member or the recorder fails to sign here or in Section VII below, indicate the reason in the space where his signature should appear.)

(Recorder)

(Member)

(Member)

[Redacted signature area]

b6-2

(Member)

SECTION VII - MINORITY REPORT (para 3-13, AR 15-6)

To the extent indicated in Inclosure _____, the undersigned do(es) not concur in the findings and recommendations of the board. (In the inclosure, identify by number each finding and/or recommendation in which the dissenting member(s) do(es) not concur. State the reasons for disagreement. Additional/substitute findings and/or recommendations may be included in the inclosure.)

(Member)

(Member)

SECTION VIII - ACTION BY APPOINTING AUTHORITY (para 2-3, AR 15-6)

The findings and recommendations of the (investigating officer) (board) are (approved) (disapproved) (approved with following exceptions/substitutions). (If the appointing authority returns the proceedings to the investigating officer or board for further proceedings or corrective action, attach that correspondence (or a summary, if oral) as a numbered inclosure.)

Raymond T. Odierno

RECEIVED
09 SEP 2003

RAYMOND T. ODIERNO
Major General, USA
Commanding

6361

SECTION IV - FINDINGS (para 3-10, AR 15-6)

The (investigating officer) (board), having carefully considered the evidence, finds:
See attached Memorandum

SECTION V - RECOMMENDATIONS (para 3-11, AR 15-6)

In view of the above findings, the (investigating officer) (board) recommends:

6362

Exhibit A

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSDPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

Form fields: 1. LOCATION (Samarra East Air Field), 2. DATE (2003/08/16), 3. TIME (1448), 4. FILE NUMBER, 5. LAST NAME, FIRST NAME, MIDDLE NAME, 6. SSN, 7. GRADE/STATUS, 8. ORGANIZATION OR ADDRESS (64th MP CO, 720th MP BN, Samarra East Air Field), 9. [Redacted]

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

My platoon has been assigned to duties at the EPW cage now for the past 4 days. EPW [Redacted] has been showing signs and symptoms of dehydration and his body movements are weak. He also has to be escorted and carried by his two brothers every time he needs to go use the latrine outside. Yesterday, 15 Aug 03, [Redacted] stopped by the cage to evaluate some other EPW's and I asked them to evaluate [Redacted]. They evaluated him and said that he was dehydrated and advised to give plenty of water for him to drink. Each EPW is given water at their request daily. He was fed at 1100 hrs yesterday and could not keep his food down, he was vomiting. When my squad was relieved from shift that day, I backbriefed my platoon leader [Redacted] about the same EPW. This morning when my squad came onto shift, the EPW was in the same condition. [Redacted] came by the cage at about 0945 hrs, and I advised him of the EPW again. Then [Redacted] 329 FA BN did a walk through of the cage area at 1015hrs. [Redacted] advised [Redacted] of the EPW and his condition. [Redacted] took his tag number and name, then he left. At approximately 1200hrs, during a hourly headcount, the two brothers said that something was wrong with him again. We then called Guardian Main to have a medic on scene. At 1222, [Redacted] arrived and started evaluating him with the help of [Redacted]. [Redacted] tried giving an IV to the EPW, but could not get one started. We had one of the other EPW's who spoke a little bit of english to ask what was wrong with him, but he could barely speak or be understood. He also started to breath heavily. Around 1300 we notified Guardian Main that [Redacted] said to have a PA sent immediately. At 1320 [Redacted] and [Redacted] start to perform CPR on the EPW, I notified Guardian Main to have Pacesetter expidite. Approximately 1330 [Redacted] and [Redacted], 64th medics, also arrived and took over CPR. At 1333 an ambulance from Pacesetter finally arrived and transported EPW [Redacted] to BN Aid station.///End of Statement/[Redacted]

b6-4 / b7c-4

b6-4 / b7c-4

Form fields: 10. EXHIBIT, 11. INITIALS OF PERSON MAKING STATEMENT, PAGE 1 OF [] PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF [] TAKEN AT [] DATED []
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE BE INDICATED.

6303

9. STATEMENT (Continued)

AFFIDAVIT

I, [REDACTED] ^{b6-4 / b7C-4}, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED] ^{b6-4 / b7C-4}
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16th day of August, 2003 at Samarra East Air Field

ORGANIZATION OR ADDRESS

[REDACTED] ^{b6-2}
(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

[REDACTED] ^{b6-2}
(Typed Name of Person Administering Oath)
ART 136 (b) (4) UCMJ
(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT [REDACTED] ^{b6-4 / b7C-4}

Exhibit B

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).

PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.

ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.

DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION Samarra East Airfield, Iraq	2. DATE (YYYYMMDD) 2003/08/16	3. TIME 1756hrs	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED] b6-4 b7C-4	6. SSN [REDACTED] b6-4 b7C-4	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS 64th Military Police Company, Samarra East Airfield, Iraq			

9. [REDACTED] b6-4 b7C-4, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

I receive a report from [REDACTED] at approximately 1305 that the EPW Cage was requesting a medic but did not know the cause. I called the EPW Cage for further information on the reason for call and was informed that there was a detainee complaining of feeling weak, and not having been to the bathroom to urinate or defecate for the last 24 hours. Informed [REDACTED] to attend the call at approximately 1308. At approximately, 1330, overheard a request for Pacesetter Medic to attend the detainee at the camp because he had "Stop Breathing". At first break in communication, verified with EPW Cage, status as to what was happening at the cage and was told the [REDACTED] was attempting CardioPulmonary Resuscitation (CPR) on the Detainee. Me and [REDACTED] then went to the Cage, upon arrival, [REDACTED] was attempting CPR. Verified that the patient had no pulse or was breathing. Introduced a J-Tube into the patient's airway to secure airway and hold tongue in place. Relieved [REDACTED] performing Chest compression while [REDACTED] relieved [REDACTED] from performing rescue breathing. After performing CPR for approximately 5 minutes, directed [REDACTED] to prepare our M998 to transport patient to Aid Station. At that time, the ambulance from the aid station arrived. We continued CPR while the ambulance was readied to transport patient. Patient was transported to Aid Station from EPW Cage at approximately 1345 under supervision of [REDACTED].

-----End of Statement-----

b6-4
b7C-4

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED] b6-4 b7C-4	PAGE 1 OF 2 PAGES
-------------	--	-------------------

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF _____ TAKEN AT _____ DATED _____"

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE BE INDICATED.

6305

9. STATEMENT (Continued)

Not USED

[Redacted]

b6-4
b7C-4 AFFIDAVIT

WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 1. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[Redacted Signature] b6-4
b7C-4
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16 day of August, 2003 at Samarra East Airfield, Iraq

ORGANIZATION OR ADDRESS

[Redacted Signature] b6-2
(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

[Redacted Name] b6-2
(Typed Name of Person Administering Oath)
Article 13(5) 4 ucms
(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT
[Redacted] b6-4/b7C-4

TASK FORCE IRONHORSE
HEADQUARTERS, 3rd BRIGADE COMBAT TEAM
BALAD, IRAQ

DATE:

I,  ^{b6-4}_{b7C-4}, understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation


Signature

^{b6-4}_{b7C-4}

Name: 

^{b6-4}_{b7C-4}

Rank: 

Unit: *204th MP Co*

Exhibit C

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION: Samarra East Air Field, Iraq
2. DATE (YYYYMMDD): 2003/08/16
3. TIME: 1743hrs
4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME: [Redacted]
6. SSN: [Redacted]
7. GRADE/STATUS: [Redacted]
8. ORGANIZATION OR ADDRESS: 64th Military Police Company, Samarra East Air Field, Iraq

9. [Redacted] WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

[Redacted] instructed me to go down to the epw camp to check one of the epw's out who was complaining of feeling sick. I headed down there at around 1325 hrs. I set up the litter with litter stands to better treat the individual. I recognized this patient from yesterday when I evaluated him for nausea. Yesterday I gave him my personal cold one liter gatorade and instructed him to drink it and I also gave him rehydration salts and some mylanta. I advised him he needed to eat some food and also to drink the rehydration salts and if he wasn't better by tomorrow I would come see him again. The patient had no temperature and appeared weak as if he hadn't been eating. Almost every epw looks sick there too. The rehydration salts appeared to work for the others or if not we'd give them I.V. So today his two friends which one was his brother two man carried him upon the litter. Just from looking at him he appeared weak and sick. I immediately tried to initiate an IV to get some fluids in him. I was unable to do so. I tried taking his blood pressure and pulse and couldn't feel a pulse neither on the carotid or the radial. The patient was cold to touch and had poor circulation because he had no capillary refill. The patient was conscious and responding well. The patient was breathing and talking to us. But his speech was a little slurred but I was trying to get his pertinent past history of medical history and background. His brother said he hadn't ate anything in eight days. Whenever he tried to eat or drink anything he would vomit it all out. The epw who was helping with the translating told me that the patient had never been to a hospital before for anything and has been perfectly healthy up to this point. I specifically asked for any heart or lung conditions and they told me no. [Redacted] told me they tried to give him some milk yesterday but he threw that up too. At no point did the patient complain of chest pain. When I asked him he said he only had pain in his stomach. After checking his pupils for constriction which they did not constrict when I shined the light in his eyes; I decided that I need the Physician's Assistant at Pacesetter TOC, [Redacted] to come evaluate this patient. At my skill level there was nothing more I could do for him. I recognized the signs and called for the P.A. After 20 minutes of waiting I called back and spoke with Pacesetter P.A. and told them I could not feel a pulse, I couldn't get a blood pressure reading and I couldn't get an I.V. started. They instructed me to bring this patient to them instead of them coming down to the epw cage. As soon as I got back to the patient I tried taking his temperature. When the thermometer was in his mouth I noticed the patient stopped breathing. [Redacted] and myself started CPR on the patient. We performed CPR for approximately ten to fifteen minutes and [Redacted] arrived at the scene and took over CPR. Then three to five minutes later the Pacesetter ambulance arrived. [Redacted] arrived with his soldiers totally unprepared for a respiratory or cardiac problem. We resumed CPR and after two more minutes we packaged the patient up and transported him to the Pacesetter Aid Station. There he was put on a monitor. They shocked him with the paddles and intubated him. No one at the Aid Station was able to initiate an I.V. either. The P.A. was doing everything he could then. They were unable to revive the patient. When I called for the P.A. the first time it was because I knew this was a serious issue and out of my scope of practice. I was dissappointed when they had told me that I had to bring the patient to them because the patient was in need of advanced care and I had done everything I could before I called them. After they knew the patient wasn't coming back to life the P.A. was asking anyone who never had experience shocking, performing cpr or bagging a human patient to step up and practice.////End of Statement.////

b6-4
b7c-4

10. EXHIBIT
11. INITIALS OF PERSON MAKING STATEMENT: [Redacted]
PAGE 1 OF 2 PAGES
TAKEN AT DATED

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE BE INDICATED.

9. STATEMENT (Continued)

NOT USED

b6-4 / b7c-4

AFFIDAVIT

I, _____, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 1. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

b6-4 / b7c-4

(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16 day of August, 2003 at EAST SAMARRA Airfield, Iraq

b6-2

(Signature of Person Administering Oath)

(Typed Name of Person Administering Oath)

Article 136(B) 4 UCMJ

(Authority To Administer Oaths)

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

_____ b6-4 / b7c-4

TASK FORCE IRONHORSE
HEADQUARTERS, 3rd BRIGADE COMBAT TEAM
BALAD, IRAQ

DATE: 24/8/03

I,  ^{b6-4/ b7C-4}, understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature  ^{b6-4/ b7C-4}

Name: 

Rank: 

Unit: 64TH MP CO

Exhibit D

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION Samarra East Airfield, Iraq	2. DATE (YYYYMMDD) 2003/08/17	3. TIME 1200hrs	4. FILE NUMBER b6-4 / b7c-4
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	b6-4 / b7c-4
8. ORGANIZATION OR ADDRESS 64th Military Police Company Samarra East Airfield, Iraq			
9. [REDACTED]			

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 15 August 2003, [REDACTED] and I went to the EPW Cage to treat patients complaining of vomiting, stomach cramps, and being unable to have a bowel movement for a few days. A certain detainee was given [REDACTED] personal cold gatorade and some Maalox to help his stomach. This detainee is the same one who passed on 16 August 2003 at 1406. On 15 August 2003 is the first time I had seen the detainee sick and dehydrated. We did not get any complaints from him before. On 16 August 2003 [REDACTED] and I came to the EPW Cage at a little past 1300 after listening to the radio that there was a detainee that was not breathing and one of our fellow medics needed assistance. We came up on the scene and saw [REDACTED] administering chest compressions and [REDACTED] administering the breaths. We asked questions about the situation and then [REDACTED] took over with the chest compressions and I took over with administering the breaths. About ten minutes later the ambulance showed up and the patient was loaded onto the ambulance and taken to the Aidstation where he received further treatment. All the medics assisted the PA as they could until the detainee was pronounced dead at 1406. [REDACTED]

[REDACTED]

b6-4
b7c-4

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGES
-------------	---	-------------------

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF _____ TAKEN AT _____ DATED _____"
 THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

STATEMENT OF

[Redacted]

TAKEN AT

1200hrs

DATED

2003/08/17

9. STATEMENT (Continued)

b6-4 / b7c-4

[Redacted]

AFFIDAVIT

b6-4 / b7c-4

I, [Redacted], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE, I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[Redacted Signature]

b6-4 / b7c-4

(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 17 day of August, 2003 at Samarra East Airfield, Iraq

[Redacted Signature]

b6-2

(Signature of Person Administering Oath)

[Redacted Name]

b6-2

(Typed Name of Person Administering Oath)

Article 136b (4) UCMJ

(Authority To Administer Oaths)

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

[Redacted Initials] b6-4 / b7c-4

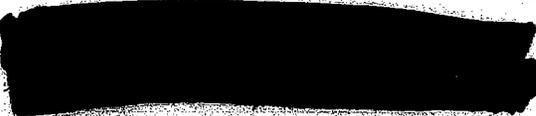
PAGE 2 OF 2 PAGES

TASK FORCE IRONHORSE
HEADQUARTERS, 3rd BRIGADE COMBAT TEAM
BALAD, IRAQ

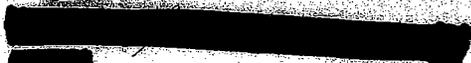
DATE: 24 August 2003

I,  understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

b6-4
b7c-4

Signature: 

b6-4 | b7c-4

Name: 

Rank: 

Unit: 64th MP CO

b6-4 | b7c-4

Exhibit E

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION Samarra East, IRAQ	2. DATE (YYYYMMDD) 20030816	3. TIME 2110	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED] b6-4 b7C-4	6. SSN [REDACTED] b6-4 b7C-4	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS MHB 3-29 FA, Samarra, IRAQ			

9. I, [REDACTED] b6-4 b7C-4, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:
 ON ²¹¹⁰ 16 AUG 03, a call came across the Battalion net from the 64th MP medics of a detainee not being able to hold down food, use the latrine and could not get a IV started. I relayed the call to [REDACTED] b6-4 b7C-4 who instructed me to have the detainee brought up to the BAs by non standard means. After 5 minutes from the time the initial call came in, which was 1316, another call came in from the MP's TOC requesting an ambulance. We inquired on the status change of patient and was told he had stopped breathing. I told the soldiers in the aid station, along with [REDACTED] b6-4 b7C-4, to prepare the Ambulance. Time to prepare ambulance took 3 minutes prior to rolling out the gate. It took approximately 5 minutes to reach the detainee cell. Upon arrival, I exited the ambulance and noticed the medics doing CPR on the detainee. After checking for a pulse when compressions were complete, the MP's started up compression. I then told my medics to turn the

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED] b6-4 b7C-4	PAGE 1 OF 4 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT _____ TAKEN AT _____ DATED _____"
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER. MUST BE BE INDICATED.

STATEMENT OF _____ TAKEN AT _____ DATED _____

9. STATEMENT (Continued)

Ambulance arrived to help speed up the evacuation took 2 minutes. Once the ambulance was ready told the MP medics to stop CPR and transferred patient to the ambulance. Time elapsed, 1 minute. The medics secured the patient in the ambulance and started CPR enroute to the BAS. I made a call on the radio to the BAS and explained the status of patient and an ETA of 3 minutes to arrival. Once I got to the BAS, patient was transferred to the trauma table where we worked on him for 22 minutes and was pronounced dead at 1406. Nothing follows —

b6-4
b7C-4



INITIALS OF PERSON MAKING STATEMENT

b6-4 / b7C-4

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION 2. DATE (YYYYMMDD) 3. TIME 4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME 6. SSN 7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS

9. I, _____, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

[Redacted] b6-4 b7C-4

10. EXHIBIT 11. INITIALS OF PERSON MAKING STATEMENT
b6-4 b7C-4 [Redacted] PAGE 1 OF _____ PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT _____ TAKEN AT _____ DATED _____
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE BE INDICATED.

STATEMENT OF _____ TAKEN AT _____ DATED _____

9. STATEMENT (Continued)

[Redacted area with handwritten notations: b6-4, b7C-4]

AFFIDAVIT

I, [Redacted], b6-4 / b7C-4, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 3. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[Redacted signature] b6-4 / b7C-4
(Signature of Person Making Statement)

WITNESSES:

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

Subscribed and sworn to before me, a person authorized by law to administer oaths, this _____ day of _____ at _____

(Signature of Person Administering Oath)

(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE OF PAGES

TASK FORCE IRONHORSE
HEADQUARTERS, 3rd BRIGADE COMBAT TEAM
BALAD, IRAQ

DATE: 24 Aug 03

I,  ^{b6-4}_{b7c-4}, understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature 

Name: 

Rank: 

Unit: *AFB 3-29 FA*

b6-4
b7c-4

Edited F

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION 3/29 BAS FA Samarra East	2. DATE (YYYYMMDD) 2003 03 16	3. TIME 1940	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED] b6-4 b7C-4	6. SSN [REDACTED] b6-4 b7C-4	7. GRADE/STATUS [REDACTED]	

8. ORGANIZATION OR ADDRESS
3/29 FA TOSL force base satter

9. [REDACTED] b6-4 b7C-4, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

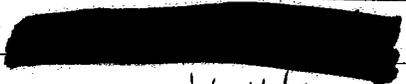
Today 16 Aug 03 at approximately 13:00 our medical section was notified via FM radio commoved from that a detainee had pass out and had stoped breathing. [REDACTED] request that we dispatch our medical team to come pick up the b6-4 fallen detainee. Our ambulance left 2:30 sec later. [REDACTED] b7C-4 [REDACTED] b6-4 b7C-4 were the ambulance team. The detainee arrived back here at the BAS approximately 15 min later in full cardiac arrest. We performed medical treatment under advance cardiac life support guide lines for 51 min and were unable to revitalize patient. I call time of death at 14:06 and notified the TOC. Nothing else follows

[REDACTED] b6-4 b7C-4

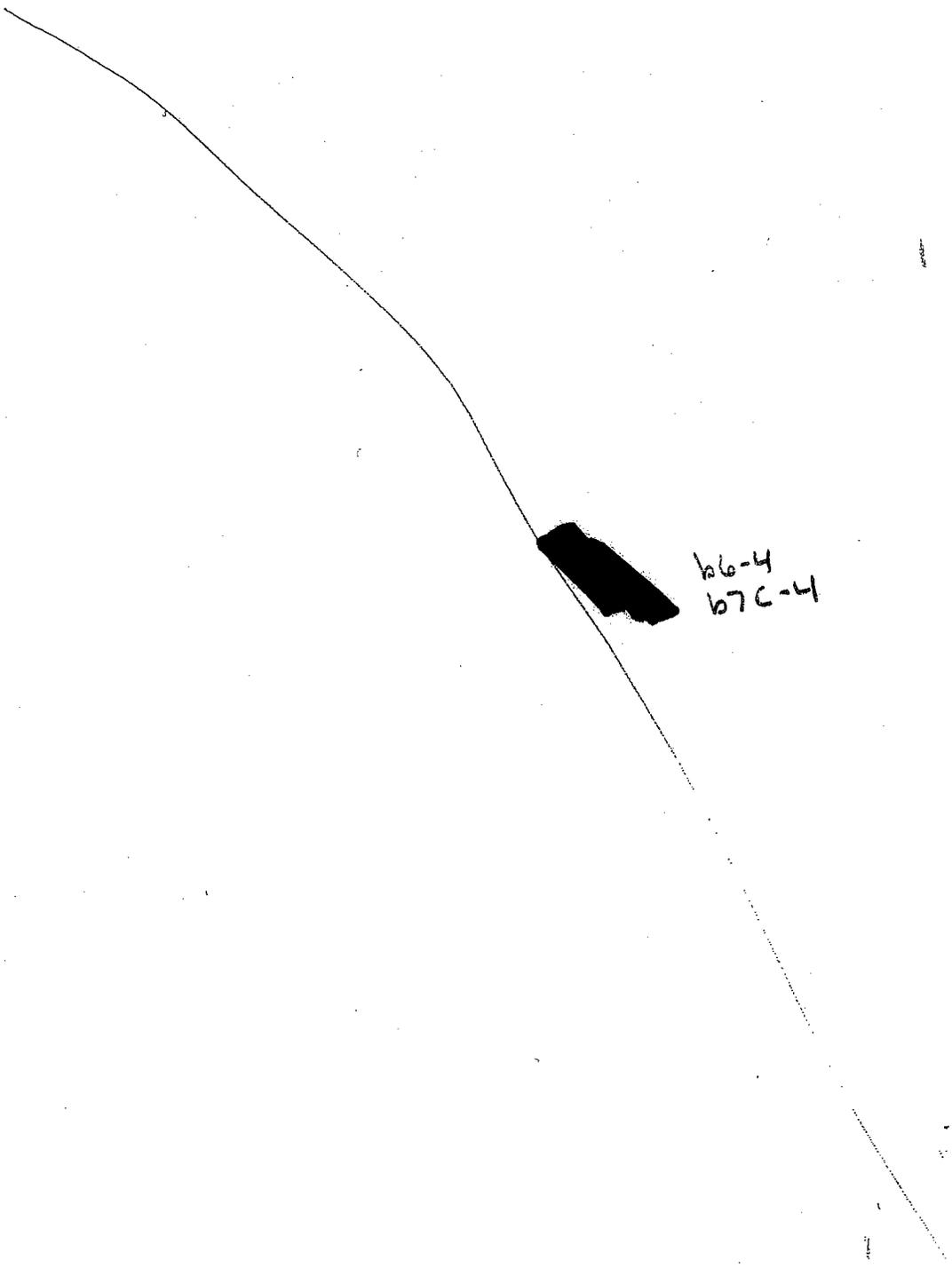
10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED] b6-4 b7C-4	PAGE 1 OF 1 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT _____ TAKEN AT _____ DATED _____"
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE BE INDICATED.

USE THIS PAGE IF NEEDED. IF THIS PAGE IS NOT NEEDED, PLEASE PROCEED TO FINAL PAGE OF THIS FORM.

STATEMENT OF  TAKEN AT 3/29 BAS DATED 2003-08-16
b6-4 / b7c-4

9. STATEMENT (Continued)

  b6-4
b7c-4

INITIALS OF PERSON MAKING STATEMENT
 b6-4 / b7c-4

PAGE 1 OF 2 PAGES

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION: 329 BAS
2. DATE (YYYYMMDD): 2003 08 16
3. TIME: 1940
4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME: [REDACTED]
6. SSN: [REDACTED]
7. GRADE/STATUS: [REDACTED]
8. ORGANIZATION OR ADDRESS: [REDACTED]

9. I, _____, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

[Large diagonal line indicating a redacted or empty statement area]

10. EXHIBIT
11. INITIALS OF PERSON MAKING STATEMENT: [REDACTED]
PAGE 1 OF 3 PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT _____ TAKEN AT _____ DATED _____
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE BE INDICATED.

STATEMENT OF



TAKEN AT

3/29 BAS

DATED

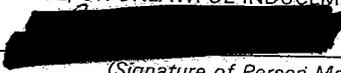
2003-08-16

9. STATEMENT (Continued)

b6-4
b7c-4

AFFIDAVIT

I,  ^{b6-4}_{b7c-4}, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE _____. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

 ^{b6-4}_{b7c-4}
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this _____ day of _____ at _____

ORGANIZATION OR ADDRESS

(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

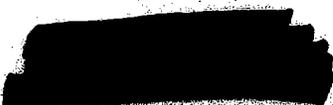
INITIALS OF PERSON MAKING STATEMENT

PAGE OF PAGES

TASK FORCE IRONHORSE
HEADQUARTERS, 3rd BRIGADE COMBAT TEAM
BALAD, IRAQ

DATE: 24 Aug 2003

I,  <sup>b6-4
b7C-4</sup>, understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature:  <sup>b6-4
b7C-4</sup>
Name: 
Rank: 
Unit: 3/29 FA

Chronology of Actions Taken During Course of Investigation

18 Aug 03: [REDACTED] ^{b6-2} notified of the appointment of 15-6 investigating officer.

19 Aug 03: I notified 3/29 FA that I would be traveling to SEAF to conduct investigation on the 20 Aug 03 and coordinated for escort support from 3 BCT.

20 Aug 03: I start the investigation at SEAF. I received the case file of the detainee and the sworn statements from all the individuals involved in the incident. I reviewed all the information given to me then I visited the detainment facility to receive an overview of the detainment facility operation and to speak with the [REDACTED] about the incident.

b6-4
b7c-4

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION: 3 BCT DETENTION CENTER, SEAF, IRAQ
2. DATE (YYYYMMDD)
3. TIME
4. FILE NUMBER: N/A
5. LAST NAME, FIRST NAME, MIDDLE NAME: [REDACTED]
6. SSN: [REDACTED]
7. GRADE/STATUS: [REDACTED]
8. ORGANIZATION OR ADDRESS: HHB, 3-29 FA, UNIT 92616, APO AE 09323-2616 (SAMARRA EAST AIR FIELD, IRAQ)

9. [REDACTED] WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:
ALL WEAPONS AND MILITARY EQUIPMENT SEIZED IN CONJUNCTION WITH THE DETENTION OF THIS INDIVIDUAL HAVE BEEN TURNED-IN TO THE APPREHENDING UNIT'S HEADQUARTERS AND WILL BE TURNED IN TO 3BCT FOR THE PURPOSE OF RE-ARMING LEGITIMATE IRAQI POLICE AND MILITARY FORCES.

10. EXHIBIT: N/A
11. INITIALS OF PERSON MAKING STATEMENT: [REDACTED]
PAGE 1 OF 1 PAGES
ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF" TAKEN AT DATED
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

STATEMENT OF

[REDACTED]

TAKEN AT

SEAF

DATED

2003/08/05

9. STATEMENT (Continued)

b6-2
b7c-2

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 1. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

b6-2
b7c-2

[REDACTED]

(Signature of Person Making Statement)

WITNESSES:

[REDACTED]

b6-2
b7c-2

ORGANIZATION OR ADDRESS

3 BCT DETENTION CENTER
SAMARRA EAST AIR FIELD, IRAQ

ORGANIZATION OR ADDRESS

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 5TH day of AUGUST, 2003 at SAMARRA EAST AIR FIELD, IRAQ

b6-2
b7c-2

N/A

(Signature of Person Administering Oath)

N/A

(Typed Name of Person Administering Oath)

N/A

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 1 PAGES

0306

BATES PAGES 6387 – 6546 HAVE BEEN REMOVED.

(AR 15-6 Investigations – 4th Infantry Division)

**RELEASABILITY DETERMINATION TO BE MADE
AT A LATER DATE.**



DEPARTMENT OF THE ARMY
HEADQUARTERS TASK FORCE IRONHORSE
OFFICE OF THE STAFF JUDGE ADVOCATE
TIKRIT, IRAQ

REPLY TO
ATTENTION OF:

AFYB-JA-AL

26 February 2004

MEMORANDUM FOR Commander, Task Force Ironhorse, Tikrit, Iraq

SUBJECT: AR 15-6 Investigation Legal Review

1. In accordance with AR 15-6, paragraph 2-3, I have reviewed the AR 15-6 investigation into the circumstances surrounding the death of a detainee on 08 February 2004. I make the following determinations:

- a. The proceedings comply with the legal requirements.
 - b. Errors in the proceedings, if any, do not have a material adverse effect on any individual's substantial rights.
 - c. Sufficient evidence supports the findings.
 - d. The recommendations are consistent with the findings.
2. The investigation is legally sufficient.
3. The point of contact is the undersigned at (DNVT) [REDACTED]

[Handwritten signature]
[REDACTED]
CPT, JA
Chief, Administrative Law

2
b6-2
b7c-2

6547



DEPARTMENT OF THE ARMY
HEADQUARTERS, 4TH INFANTRY DIVISION (MECHANIZED)
TIKRIT, IRAQ, APO, AE 09323

REPLY TO
ATTENTION OF:

AFYB-SG

2 March 2004

MEMORANDUM for SJA, 4th Infantry Division (Mech):

SUBJECT: AR 15-6 Investigation of the death detainee # [REDACTED] (b)6-4

After reviewing the findings, and statements from this investigation, I make the following recommendations:

1. A Doctor or PA should review all intake medical screenings, and sign/date the form as reviewed. They will personally examine detainees as indicated, based on the results of the screening form. This review will occur after each transfer of an EPW as well as after the initial intake.
2. A Doctor or PA should conduct weekly rounds with MP medics.
3. The intake medical assessment must be reviewed and updated by the medic at the accepting facility. The reviewer will sign and date the updated form. All assessments will then be delivered to the supervising doctor or PA for their review.

4. [REDACTED]

5. [REDACTED]

6. POC of this memorandum is the undersigned at [REDACTED] or b64 b7c4
[REDACTED] b64 b7c4

[REDACTED] b64-b7c4

Taskforce Ironhorse Surgeon

b(5)-3
deliberate
process

REPORT OF PROCEEDINGS BY INVESTIGATING OFFICER/BOARD OF OFFICERS

For use of this form, see AR 15-6; the proponent agency is OTJAG.

IF MORE SPACE IS REQUIRED IN FILLING OUT ANY PORTION OF THIS FORM, ATTACH ADDITIONAL SHEETS

SECTION I - APPOINTMENT

Appointed by Commanding General
(Appointing authority)

on 8 FEB 04 (Date) (Attach inclosure 1: Letter of appointment or summary of oral appointment data.) (See para 3-15, AR 15-6.)

SECTION II - SESSIONS

The (investigation) (board) commenced at FOB IRONHORSE at 1200
(Place) (Time)

on _____ (Date) (If a formal board met for more than one session, check here . Indicate in an inclosure the time each session began and ended, the place, persons present and absent, and explanation of absences, if any.) The following persons (members, respondents, counsel) were present: (After each name, indicate capacity, e.g., President, Recorder, Member, Legal Advisor.)

The following persons (members, respondents, counsel) were absent: (Include brief explanation of each absence.) (See paras 5-2 and 5-8a, AR 15-6.)

The (investigating officer) (board) finished gathering/hearing evidence at 1536 on 26 FEB 04
(Time) (Date)
and completed findings and recommendations at _____ on _____
(Time) (Date)

SECTION III - CHECKLIST FOR PROCEEDINGS

A. COMPLETE IN ALL CASES

		YES	NO ¹	NA ²
1	Inclosures (para 3-15, AR 15-6)			
	Are the following inclosed and numbered consecutively with Roman numerals: (Attached in order listed)			
	a. The letter of appointment or a summary of oral appointment data?			
	b. Copy of notice to respondent, if any? (See item 9, below)			
	c. Other correspondence with respondent or counsel, if any?			X
	d. All other written communications to or from the appointing authority?			X
	e. Privacy Act Statements (Certificate, if statement provided orally)?			
	f. Explanation by the investigating officer or board of any unusual delays, difficulties, irregularities, or other problems encountered (e.g., absence of material witnesses)?			X
	g. Information as to sessions of a formal board not included on page 1 of this report?			X
	h. Any other significant papers (other than evidence) relating to administrative aspects of the investigation or board?			X

FOOTNOTES: ¹ Explain all negative answers on an attached sheet.
² Use of the N/A column constitutes a positive representation that the circumstances described in the question did not occur in this investigation or board.

6549

SECTION VI - AUTHENTICATION (para 3-17, AR 15-6)

THIS REPORT OF PROCEEDINGS IS COMPLETE AND ACCURATE. (If any voting member or the recorder fails to sign here or in Section VII below, indicate the reason in the space where his signature should appear.)

b64 b7c4

(Recorder)

(Member)

(Member)

(Member)

(Member)

b64 b7c4

SECTION VII - MINORITY REPORT (para 3-13, AR 15-6)

To the extent indicated in Inclosure _____, the undersigned do(es) not concur in the findings and recommendations of the board. (In the inclosure, identify by number each finding and/or recommendation in which the dissenting member(s) do(es) not concur. State the reasons for disagreement. Additional/substitute findings and/or recommendations may be included in the inclosure.)

(Member)

(Member)

SECTION VIII - ACTION BY APPOINTING AUTHORITY (para 2-3, AR 15-6)

The findings and recommendations of the (investigating officer) (board) are (approved) (disapproved) (approved with following exceptions/substitutions). (If the appointing authority returns the proceedings to the investigating officer or board for further proceedings or corrective action, attach that correspondence (or a summary, if oral) as a numbered inclosure.)

1. A doctor or physician's assistant should review all intake medical screenings, and sign/date the form as reviewed. They will personally examine detainees as indicated, based on the results of the screening form. This review will occur after each transfer of a detainee as well as after the initial intake.
2. A doctor or physician's assistant should conduct weekly rounds with military police medics.
3. The intake medical assessment must be reviewed and updated by the medic at the accepting facility. The reviewer will sign and date the updated form. All assessments will then be delivered to the supervising doctor or physician's assistant for review.

RAYMOND T. ODIERNO
Major General, USA
Commanding

07 MAR 2004

6550

MEMO FOR RECORD – EVIDENCE

On 04 Feb 2004, it was noticed by shift change that detainee # [REDACTED] ^{(b)6-4} was not moving. (exhibit G) After the medic summoned the physician on call, [REDACTED] ^{664 67c4} the EPW was pronounced dead at 0730. (exhibit G) Prior to pronouncing the detainee, [REDACTED] had never seen, treated or been called to render advice on the patient. (exhibit D) ^{664 67c4}

Prior to arrival at FOB Ironhorse, the detainee was processed at Brassfield Move FOB. (exhibit F) An intake physical done at that time by [REDACTED] ^{664 67c4} recorded that the patient had diabetes and anemia, as well as left kidney failure. The diabetes notation was crossed off without explanation. (exhibit F) Of particular importance, it was noted that the detainee was urinating only 1 oz. daily. (exhibit F)

The detainee was transported to Ironhorse on 5 Feb 2004. At the time of reception, the detainee was noted to be frail appearing, weak, and required assistance in dismounting the vehicle. (exhibit C) During the incarceration, the detainee had two episodes of fainting or near fainting, one resulting in injury requiring wound care. In addition, he was so weak that he required assistance in holding his head up for the photo ID. (exhibit C)

^{664 67c4} On the morning of 7 Feb 2004, the detainee was seen by the MP medic, [REDACTED]. He stated that through an interpreter, the detainee reported painful urination. No action was taken by the medic. (exhibit E)

^{664 67c4} On the morning of 8 Feb 2004, [REDACTED] ^{664 67c4} and [REDACTED] ^{664 67c4} were summoned to the detainee's area because he was not moving. [REDACTED] ^{664-67c4} check the detainee's pulse and also noted that he was cold. (exhibit B) The detainee was last seen alive during the evening coffee and soup administration. (exhibit A) Prior to the detainee's demise, the patient was not interrogated at FOB Ironhorse. (exhibit B)

FINDINGS:

1. The medic at FOB Ironhorse failed to recognize the seriousness of the detainee's condition, did not read the intake physical and failed to contact appropriate medical personnel for guidance and treatment.
2. The medic at FOB Brassfield MAY not have recognized the seriousness of the detainee's condition and may not have sought appropriate medical advice.
3. The medic at FOB Ironhorse appeared not to be aware of the detainee's medical conditions and it appears that the intake sheet was not available to the medic.

4. Although in hindsight, officer personnel at the detention center were aware of the frail nature of the detainee, it appears that this was not communicated to the medic.

MEMO FOR RECORD – RECOMMENDATIONS

[REDACTED]

b-5-1

		YES	NO	NA ²
2	Exhibits (para 3-16, AR 15-6)			
	a. Are all items offered (whether or not received) or considered as evidence individually numbered or lettered as exhibits and attached to this report?			X
	b. Is an index of all exhibits offered to or considered by investigating officer or board attached before the first exhibit?	X		
	c. Has the testimony/statement of each witness been recorded verbatim or been reduced to written form and attached as an exhibit?		X	
	d. Are copies, descriptions, or depictions (if substituted for real or documentary evidence) properly authenticated and is the location of the original evidence indicated?		X	
	e. Are descriptions or diagrams included of locations visited by the investigating officer or board (para 3-6b, AR 15-6)?			X
	f. Is each written stipulation attached as an exhibit and is each oral stipulation either reduced to writing and made an exhibit or recorded in a verbatim record?			X
	g. If official notice of any matter was taken over the objection of a respondent or counsel, is a statement of the matter of which official notice was taken attached as an exhibit (para 3-16d, AR 15-6)?			X
3	Was a quorum present when the board voted on findings and recommendations (paras 4-1 and 5-2b, AR 15-6)?			X
B. COMPLETE ONLY FOR FORMAL BOARD PROCEEDINGS (Chapter 5, AR 15-6)				
4	At the initial session, did the recorder read, or determine that all participants had read, the letter of appointment (para 5-3b, AR 15-6)?			
5	Was a quorum present at every session of the board (para 5-2b, AR 15-6)?			
6	Was each absence of any member properly excused (para 5-2a, AR 15-6)?			
7	Were members, witnesses, reporter, and interpreter sworn, if required (para 3-1, AR 15-6)?			
8	If any members who voted on findings or recommendations were not present when the board received some evidence, does the inclosure describe how they familiarized themselves with that evidence (para 5-2d, AR 15-6)?			
C. COMPLETE ONLY IF RESPONDENT WAS DESIGNATED (Section II, Chapter 5, AR 15-6)				
9	Notice to respondents (para 5-5, AR 15-6):			
	a. Is the method and date of delivery to the respondent indicated on each letter of notification?			
	b. Was the date of delivery at least five working days prior to the first session of the board?			
	c. Does each letter of notification indicate --			
	(1) the date, hour, and place of the first session of the board concerning that respondent?			
	(2) the matter to be investigated, including specific allegations against the respondent, if any?			
	(3) the respondent's rights with regard to counsel?			
	(4) the name and address of each witness expected to be called by the recorder?			
	(5) the respondent's rights to be present, present evidence, and call witnesses?			
	d. Was the respondent provided a copy of all unclassified documents in the case file?			
	e. If there were relevant classified materials, were the respondent and his counsel given access and an opportunity to examine them?			
10	If any respondent was designated after the proceedings began (or otherwise was absent during part of the proceedings):			
	a. Was he properly notified (para 5-5, AR 15-6)?			
	b. Was record of proceedings and evidence received in his absence made available for examination by him and his counsel (para 5-4c, AR 15-6)?			
11	Counsel (para 5-6, AR 15-6):			
	a. Was each respondent represented by counsel?			
	Name and business address of counsel:			
	(If counsel is a lawyer, check here <input type="checkbox"/>)			
	b. Was respondent's counsel present at all open sessions of the board relating to that respondent?			
	c. If military counsel was requested but not made available, is a copy (or, if oral, a summary) of the request and the action taken on it included in the report (para 5-6b, AR 15-6)?			
12	If the respondent challenged the legal advisor or any voting member for lack of impartiality (para 5-7, AR 15-6):			
	a. Was the challenge properly denied and by the appropriate officer?			
	b. Did each member successfully challenged cease to participate in the proceedings?			
13	Was the respondent given an opportunity to (para 5-8a, AR 15-6):			
	a. Be present with his counsel at all open sessions of the board which deal with any matter which concerns that respondent?			
	b. Examine and object to the introduction of real and documentary evidence, including written statements?			
	c. Object to the testimony of witnesses and cross-examine witnesses other than his own?			
	d. Call witnesses and otherwise introduce evidence?			
	e. Testify as a witness?			
	f. Make or have his counsel make a final statement or argument (para 5-9, AR 15-6)?			
14	If requested, did the recorder assist the respondent in obtaining evidence in possession of the Government and in arranging for the presence of witnesses (para 5-8b, AR 15-6)?			
15	Are all of the respondent's requests and objections which were denied indicated in the report of proceedings or in an inclosure or exhibit to it (para 5-11, AR 15-6)?			
FOOTNOTES: 1) Explain all negative answers on an attached sheet. 2) Use of the N/A column constitutes a positive representation that the circumstances described in the question did not occur in this investigation or board.				

6554

SECTION IV - FINDINGS (para 3-10, AR 15-6)

The (investigating officer) (board), having carefully considered the evidence, finds:

SEE ATTACHED MEMO

SECTION V - RECOMMENDATIONS (para 3-11, AR 15-6)

In view of the above findings, the (investigating officer) (board) recommends:

SEE ATTACHED MEMO

6555

USAPA.V1.20

1. A doctor or physician's assistant should review all intake medical screenings, and sign/date the form as reviewed. They will personally examine detainees as indicated, based on the results of the screening form. This review will occur after each transfer of a detainee as well as after the initial intake.
2. A doctor or physician's assistant should conduct weekly rounds with military police medics.
3. The intake medical assessment must be reviewed and updated by the medic at the accepting facility. The reviewer will sign and date the updated form. All assessments will then be delivered to the supervising doctor or physician's assistant for review.

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSDPS

PRIVACY ACT STATEMENT

PRIVACY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
LEGAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
HOW IT IS USED: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

Form with fields: 1. POSITION (TASK Force Inmate), 2. DATE (20040219), 3. TIME (10 30), 4. FILE NUMBER, 5. LAST NAME, FIRST NAME, MIDDLE NAME, 6. SSN, 7. GRADE/STATUS, ORGANIZATION OR ADDRESS.

... WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

I went on shift at 1900 hrs I got off that morning at 0700 hrs. During night shift the only thing that happened was the soup and coffee distribution to the detainees around 2000 hrs. Shift was running very smoothly that night until the morning. Shift change was at 0700hrs. The on coming shift did a head count of detainees and one detainee didn't come out of his room during the count. A soldier from the on coming shift went to check on the detainee. The soldier came out of the room and said to me, "I think he has passed." At that time the NCIC's went inside the cage to confirm that the detainee passed. At that time I was told to stand by and pull security while they went to notify higher of the situation. When they returned they said I could proceed to my living quarters.

EXHIBIT A, 11. INITIALS OF PERSON MAKING STATEMENT, PAGE 1 OF 2 PAGES

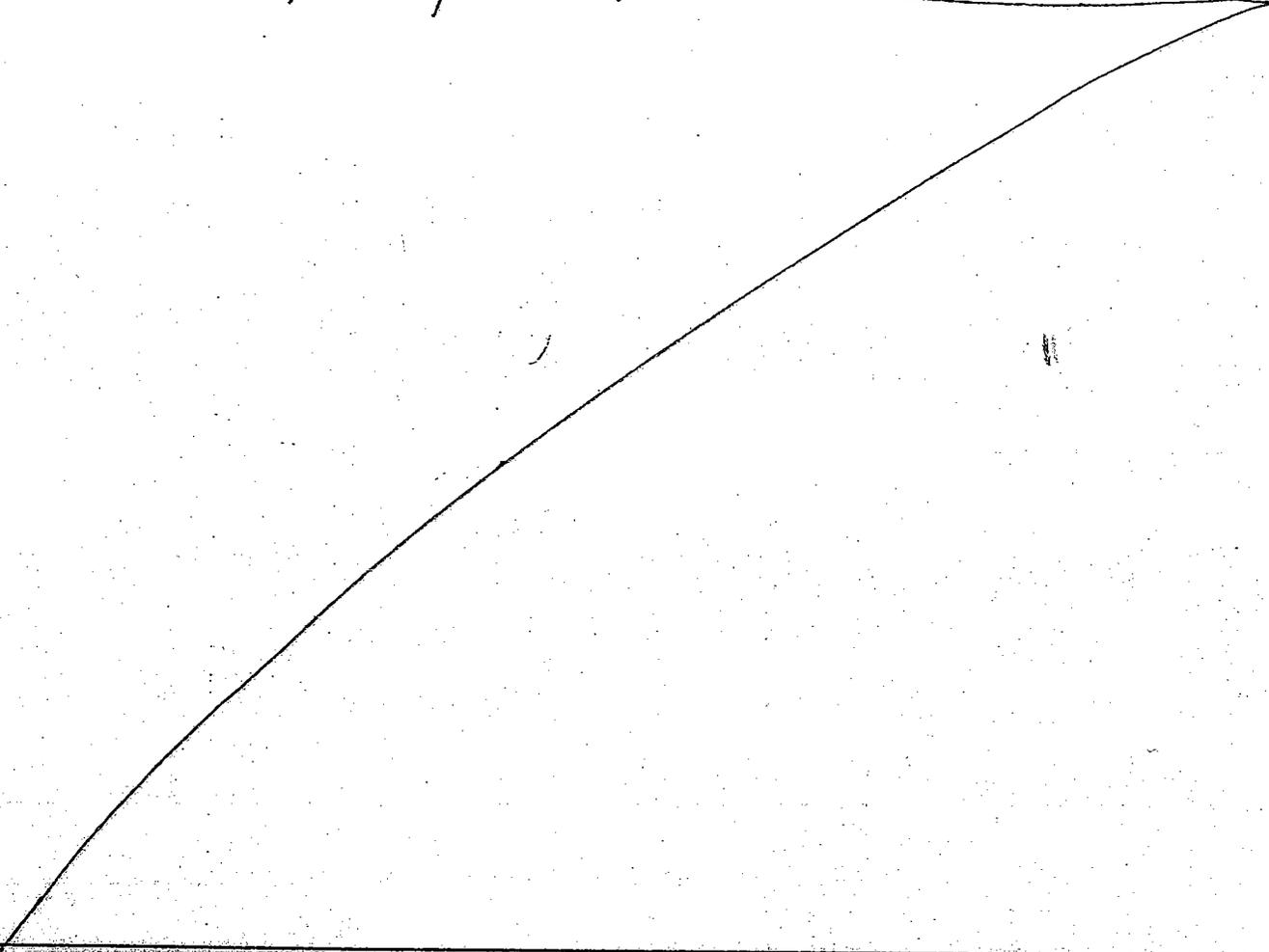
ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF ... TAKEN AT ... DATED 19 Feb 04

6557

MENT OF [REDACTED] 664 b7c4 TAKEN AT FBI IRONHOUSE DATED 19 Feb 04

STATEMENT (Continued)

NOTHING FOLLOWS



[REDACTED] 664 b7c4 AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE [REDACTED] AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE TO ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED SIGNATURE] 664 b7c4
(Signature of Person Making Statement)

NECESSARY:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 19 day of Feb, 2004 at FBI IRONHOUSE

ORGANIZATION OR ADDRESS

[REDACTED SIGNATURE] 664 b7c4
(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Typed Name of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Authority To Administer Oaths)

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

PRIVACY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
LEGAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
KEY USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. STATION FOB INH HOUSE	2. DATE (YYYYMMDD) 20040219	3. TIME 2AM 10:52	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS b64 b7c4	b64 b7c4
8. ORGANIZATION OR ADDRESS [REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

9. I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH: [REDACTED] b64 b7c4

ON 8 FEB 04 at approx 0700 hrs, [REDACTED] called [REDACTED] and myself to come into Room #2 to see something. When [REDACTED] and myself got into the room [REDACTED] was lying there not moving. I checked his pulse. He was cold and didn't have a pulse. I told [REDACTED] that he was dead that we needed to get a medic and [REDACTED] and [REDACTED] went up to ops to notify [REDACTED] [REDACTED] was not interrogated the night before. The soup was given out to all personnel that wanted it the night before. END OF STATEMENT!!!

b64 b7c4

b64
b7c4
b64
b7c4

b64 b7c4

EXHIBIT B	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGES
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TOTAL PAGES MUST CONTAIN THE HEADING 'STATEMENT OF' TAKEN AT FOB INH DATED 19 Feb 04

6559

b64 b7c4

MENT OF

[REDACTED]

TAKEN AT

FoB IRON HORSE

DATED

19 Feb 04

STATEMENT (Continued)

NO OTHER FOLLOWS

[Large diagonal line across the page]

b64 b7c4

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE TO ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

b64 b7c4

[REDACTED Signature]

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 19 day of FEBRUARY 2004 at FoB IRON HORSE

[Organization or Address lines]

[REDACTED Signature]

b64 b7c4

(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

[REDACTED]

b64 b7c4

2 2

6560

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

PRIVACY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
LEGAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
OTHER USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

Form with fields: 1. NAME, 2. DATE (YYYYMMDD), 3. TIME, 4. FILE NUMBER, 5. GRADE/STATUS, 6. SSN, 7. GRADE/STATUS. Includes handwritten entries like '20040219', '1110', and redacted areas with 'b64 b7c4' markings.

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH.

ON OR ABOUT 8 FEB 2004 I RECEIVED DETAINEE [REDACTED] FROM 3BCT. MY INITIAL CONTACT WITH THIS DETAINEE WAS WHEN HE WAS FIRST PULLED OFF OF THE LMTV HE WAS TRANSPORTED IN. HE WAS VERY FRAIL AND NEEDED ASSISTANCE DISMOUNTING THE VEHICLE. WHILE IN PROCESSING THE DETAINEE COULD NOT HOLD HIS HEAD UP ENOUGH IN ORDER FOR US TO TAKE HIS PICTURE SO ANOTHER MP HAD TO ASSIST HIM. HIS WRISTS WERE SO SMALL THAT HE COULD SLIDE THE HANDCUFFS OFF WITH EASE. DUE TO HIS FRAIL STATE WE DID NOT REQUIRE HIM TO COME OUT OF HIS ROOM FOR HEAD COUNT; AN MP WOULD GO IN TO ENSURE HE WAS STILL ACCOUNTED FOR, THERE WERE TIMES (2 TO BE EXACT) THAT THE DETAINEE FELL OUT OF THE LATRINE AND INJURED HIMSELF (MEDIC TREATED THE CUT ON HIS NOSE AS A RESULT OF THE FALL). ON THE EVENING OF 7 FEB 04 THE DETAINEE DID RECEIVE HIS COFFEE AND SOUP, THE NEXT MORNING AT APPROX 0645 [REDACTED] DISCOVERED THE DETAINEE WHILE CONDUCTING HEAD COUNT. [REDACTED] INFORMED THE [REDACTED] WHO IN TURN CONTACTED THE [REDACTED] AT THAT TIME THE SENIOR MEDIC REQUESTED THE PRESENCE OF A DOCTOR TO PRONOUNCE THE DEATH. I AM NOT SURE OF THE NAMES OF THE PA OR DOCTOR THAT PRONOUNCED THE DEATH.

Form with fields: EXHIBIT (C), 11. INITIALS OF PERSON MAKING STATEMENT, PAGE 1 OF 2 PAGES.

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF

TAKEN AT DATED

6561

STATEMENT (Continued)

NOT USED 664 6704

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE [REDACTED]. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE TO ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNDUE INFLUENCE, OR UNLAWFUL INDUCEMENT

664 6704

[REDACTED SIGNATURE]

(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 19 day of Feb 2004 at FIA [REDACTED]

[REDACTED SIGNATURE]

(Signature of Person Administering Oath)

664 6704 #612

ORGANIZATION OR ADDRESS

(Typed Name of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Authority To Administer Oaths)

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is DDCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION: FOB TRAMHOSE
2. DATE (YYYYMMDD): 20040219
3. TIME: 1525
4. FILE NUMBER:
5. LAST NAME, FIRST NAME, MIDDLE NAME: [REDACTED] 664 6704
6. SSN: [REDACTED] 664 6704
7. GRADE/STATUS: [REDACTED] 664 6704
8. ORGANIZATION OR ADDRESS: [REDACTED] 664 6704
9. [REDACTED] 664 6704

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

I was awakened by the medic on call; I was told a doctor was needed to pronounce an EPW dead. I walked to the EPW camp and into the cell where the EPW was. The EPW did not have spontaneous respirations, no pulse was felt, eyes were fixed and dilated. A medic took the patient's rectal temp which was <95°F. Prior to pronouncing this patient dead, I had never treated him, seen him, or heard of him.

10. EXHIBIT: D
11. INITIALS OF PERSON MAKING STATEMENT: [REDACTED] 6646704
PAGE 1 OF 2 PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF [REDACTED] TAKEN AT [REDACTED] DATED 19 Feb 04

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

STATEMENT OF

[REDACTED]

6646704

TAKEN AT

FBI [REDACTED]

DATED

19 Feb 44

STATEMENT (Continued)

Nothing follows

[Large diagonal line indicating the end of the statement]

6646704 AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE TO ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED SIGNATURE]

664 6704

(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 15 day of Feb 204 at FBI [REDACTED]

ORGANIZATION OR ADDRESS

[REDACTED SIGNATURE]

6646704

(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is DDCSOPS

PRIVACY ACT STATEMENT

PRIVACY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRIVACY PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
PRIVACY USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
PRIVACY ASSURE: Disclosure of your social security number is voluntary.

1. NAME (LAST, FIRST, MIDDLE)	2. DATE (YYYYMMDD)	3. TIME	4. FILE NUMBER
POB [REDACTED]	20040226	1701	
5. GRADE/STATUS	6. SSN	7. GRADE/STATUS	
[REDACTED]	b64 57C	b64 67C4	b6467C4
8. ORGANIZATION OR ADDRESS	b6467C4		
[REDACTED]	b6467C4		

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On the morning of 7 Feb 04 I went to the Epw cage to hand out medications between 0800 to 0900. Upon arrival to the Epw cage the mps on duty informed me that one of the detainees was complaining of something. Upon completion of handing out medications I checked out the detainee. The detainee was laying down and I asked him through another detainee acting as an translator what was the problem. The detainee stated that it hurt when he urinated. I then asked the detainee if he had kidney stones. After this I took his vital signs. Everything was within normal ranges. While I was doing this the mps told me that he had fainted leaving the latrine. I noticed he scratched his nose so I cleaned it up. I then asked the detainee if he had any other medical problems. He said no, just the kidney stones. I then asked if he was on any medication, again the detainee said no. After this I told him if it didnt get better to let me know. I then left the cage area.

EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF	PAGES
E	[REDACTED] b6467C4	2	2
ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF b6467C4 [REDACTED] TAKEN AT		DATED 20 Feb 04	

STATEMENT OF

[REDACTED]

66467c4

TAKEN AT

FBI Dulles

DATED

26 Feb 04

STATEMENT (Continued)

— end of statement —

[Large diagonal line indicating end of statement]

66467c4

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE TO ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

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(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 26 day of Feb 2004 at FBI Dulles

ORGANIZATION OR ADDRESS

[REDACTED] Person Administering Oath

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(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

ORGANIZATION OR ADDRESS

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NAME: 66-4 SEX: M DOB: 1943
EPW NO. [REDACTED] CAGE A

DATE SCREENED: 1 Feb 04
MEDIC: [REDACTED]

ASSESSMENT

GENERAL IMPRESSION: GOOD/BAD/MEDIUM
PHYSICAL INJURIES: 0

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IF OLD HOW OLD: _____
BLEEDING PRESENT: 0
MEDICATIONS ON HAND: 0

MEDICAL HISTORY/CONDITIONS: pt states he takes meds for anemia and diabetes of home, name he does not know

HEART
STROKE
HEART DISEASE:
DYSRHYTHMIAS
HYPERTENSION
HYPOTENSION
OTHER
B/P:
P:
MEDS:
P02:

LUNGS
COPD
BRONCHITIS
TB
ASTHMA
MEDS
LUNG SOUNDS:
COUGHING? Y/N

OTHER
DIABETES: not diabetic
ANEMIA
PSYCHIATRIC
SEIZURES
LIVER DISEASE
KIDNEY
partial
kidney failure

ALLERGIES: UKA, NKDA

MEDICAL COMMENTS: pt is old and needs time necessary to urinate. if too much urine in a case of kidney failure can be a emergency.

MEDICAL EXAMINATION AND TREATMENT:

SMOKE HX: 2 packs daily & 25 years

ETOH: _____

SCARS: above umbilical, surgical HOW OLD: _____

INFECTIONS: 0
SKIN TEMPERATURE /CONDITION/APPEARANCE: no jaundice

EYES: no jaundice, periorbital

LICE/ITCHING: 0

SUBJECTIVE: 61 yo pw fatigue, dizziness from standing up and walking. says he's not eating anything except crackers. pt has been drinking 1/2 bottle of water and urinating daily only 1oz daily. urine is yellow abdominal is bloated.

TREATMENT: allow time to urinate. talk with M.D. about pt. given vitamin C 1000mg, pepto bismol table in between meals.

INCIDENT REPORT FORM

Type of Report: Initial

Date/time of report: 080805February2004

Date/time of incident: 080708February2004

Location of incident: LD 80132903 (TF IH CCP-Tikrit Main Palace)

Unit involved in the incident: 4th Platoon, 4th Military Police Company

Name of senior person involved in incident and contact information: [REDACTED]

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[REDACTED]. All persons named can be reached by DNVT at [REDACTED].

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Narrative of Incident: On the morning of 08FEB04 at approximately 0700 4th platoon, 4th Military Police Company assumed responsibility of the detention facility from 5th platoon, 4th Military Police Company. At every shift change there is a head count conducted with both the on coming shift and off going shift personnel present. As the head count was being conducted it was noticed by [REDACTED] that one of the detainees was not present. [REDACTED] went into cell #2 to check on the detainee and that is when it was recognized that the detainee wasn't moving. [REDACTED] nudged the detainee and asked him if he was ok and he received no response. [REDACTED] notified the off going Sergeant of the Guard who was [REDACTED] that the detainee wasn't moving. At that time [REDACTED] took the detainee's pulse and determined that there was no pulse. [REDACTED] informed [REDACTED] to go to the company to inform a medic of the situation and to get a doctor to officially pronounce the detainee as being deceased. At approximately 0730 [REDACTED] pronounced detainee #5982 as being deceased. [REDACTED] from the PMO was notified immediately upon discovery of the body who in turn notified the deputy provost marshal [REDACTED] and Mortuary Affairs.

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Friendly Casualties: N/A

Enemy Casualties: N/A

EPWs: Deceased of unknown causes

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POC name and contact information: [REDACTED] 4th MP [REDACTED] DNVT [REDACTED] at DNVT [REDACTED]

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EXHIBIT H

MEMO FOR RECORD

26 February 2004

On 20 Feb 2004 at approximately 1100 hrs, I conducted a phone interview with [REDACTED] assigned to Brassfield Move FOB. [REDACTED] the FOB that did the initial intake processing on the EPW named [REDACTED] Ahmed. The intake processing was accomplished on 1 Feb 2004.

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[REDACTED] had no recollection of the above mentioned EPW or of the medical note written on that date (Exhibit F). He did say that the note would have prompted a call to the physician on duty but can't recall if that call was made or if a physician was contacted.

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[REDACTED] b64 b7c4