

STATEMENT

Place : Building 760, NCISRU Guantanamo Bay, Cuba

Date : June 14, 2006

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I, (b)(3) (b)(6) (b)(7)(C) make the following free and voluntary statement to Special Agent (b)(3) (b)(6) whom I know to be a Representative of the United States Naval Criminal Investigative Service. I make this statement of my own free will and without any threats made to me or promises extended. I fully understand that this statement is given concerning my knowledge of the three detainee deaths which occurred in the Alpha Block of Camp 1 at Camp Delta, Joint Task Force Guantanamo Bay, Cuba, during the early morning hours of 10JUN06. (b)(3) (b)(6)

For identification purposes, I, (b)(3) (b)(6) (b)(7)(C) am a Master at Arms (MA3), USN, JTF-NEGB, Guantanamo Bay, Cuba. I arrived at GTMO on 03DEC05, and worked in Camp 4 for four months, and moved to escorts APR06. I was at GTMO previously for six months from FEB05 to AUG05, for rotation 6.0 with Alpha Company. During that time I worked in Camp 2 and 3 for four months and as an escort for two months. On the night 09JUN06, I was working on the Escort Team, either (b)(2) My 12 hour shift started at (b)(2) As an escort team member, I was responsible for timely movements of detainees to medical and interrogations. Escort team members also responsible for contractor escorts. Escort team members work camp wide, but are based out of building 1 where the DOC is located. (b)(3) (b)(6)

In the early morning hours of 10JUN06, at approximately 0030 or 0045, I was standing by when one of the escort control personnel called a Code (b)(2) in Camp 1. The specific block was not indicated by escort control. Code (b)(2) is medical brevity code indicating that a detainee is having life threatening symptoms, such as chest pains, but Code (b)(2) is not the highest code. During the six months I was at GTMO in FEB to AUG05, there were a lot of Code (b)(2) For a while during that period there were over ten Code (b)(2) a day, due to detainees dropping out due to hunger strikes. I became very familiar with Code (b)(2) responses, and knew the exact procedures to handle a Code (b)(3) (b)(6) (b)(7)(C)

On 10JUN06, once the (b)(2) was called, my partner, (b)(3) (b)(6) and I were told to report to the Platoon Leader (PL) of Camp 1. We were not given an exact location to respond to, so we proceeded to the SALLY of Camp 1. We asked the SALLY which block the Code (b)(2) was on, SALLY told us that the detainee was already in the Detainee Clinic (DET), at which point MA2 (b)(3) and I proceeded to the DET clinic. I was surprised to hear that the detainee was already in the clinic, because he was not supposed to be moved from his cell without an escort team, for this reason I had a feeling something was wrong. From my experience, the usual response to a Code (b)(2) involves the Block Guard calling the Block Sergeant who will call the Sergeant of the Guard (SOG). The SOG then calls DOC, and DOC contacts medical and escort teams to respond to the detainee's cell prior to removal. (b)(3) (b)(6)

As (b)(3) (b)(6) and I entered the clinic, we saw the detainee, ISN 093, lying on a stretcher in the center of the clinic with a lot of medical personnel around him. On the morning of 10JUN06, MA2 (b)(3) and I were responsible first detainee. When detainees are out of their cells it is our (b)(3) (b)(6) (b)(7)(C)

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(b)(7)(C) responsibility to look after their well-being and to ensure the safety of the detainee and those around him. The first thing I noticed about the detainee was his blue feet. I also noticed the detainee was limp. We asked medical if we would be going to the Naval Station Hospital and they said we would, so I called back to control to have someone bring over a full set of shackles and the ID card for ISN 093, because this is standard procedure. ID cards or "Ball cards" are required to move a detainee.

At about this time, medical advised the Camp 1 guards that they needed to remove the handcuffs that were on the detainee so that they could put the IV in him. I also recall a more senior medical person telling a junior corpsman to "stick him with something or start chest compression," but I never saw any medical staff perform chest compressions on the detainee. I did observe medical putting ivy's into the detainee at about the same time I asked and was told the detainee on the bed was ISN093.

Medical advised the Camp 1 guards that they needed to remove the handcuffs that were on the detainee so that they could put the IV in him. After the handcuffs were removed, I observed a Corpsman wrapping an altered detainee sheet, that looked like the same material ISN 093 used to hang himself, around the detainee's right wrist. The other side of the material was bound to the detainee's left wrist, with approximately a foot of cloth in between. The cloth was not on the detainees wrists when the Camp 1 guards removed the handcuffs a few minutes earlier. One reason I noticed this is because usually escorts respond to the cell on a Code (b)(3) and Flex cuffs are used, but in this instance we did not go to the cell, and the detainee was handcuffed.

One of the other detainees then arrived on a stretcher. I observed that this detainee was unconscious also. I directed the group carrying the second detainee, ISN 588, to put him into the first room on the left while I moved chairs out of the hallway. I moved back over to ISN 093, and noticed that FC1 (b)(3) (b)(6) Combat Camera, from DOC was filming ISN 093. Then the Commanding Officer of Joint Detention Group (JDG), (b)(3) (b)(6) (b)(7)(C) arrived. The Colonel handed his cell phone to MA2 (b)(3) (b)(6) and asked her to get Naval Expeditionary Guard Battalion Commanding Officer, Commander (b)(3) (b)(6) on the line. At some point I also remember some Camp 1 guards running in looking for backboards, but the board was not there so they ran back out. I know that the next two detainees had escort members carrying the detainees on the backboards when they were brought into medical.

I remember Colonel (b)(3) (b)(6) saying to "recall everyone now, at least a hundred people". Another two Combat Camera personnel also arrived to begin filming the other two detainees with digital Cam Corders. I do not know how much of a chance they had to film and am not sure if the third detainee had arrived yet, because Colonel B told them to stop fairly quickly. When the third detainee did arrive in medical, which was right around this time, he and was taken into a third area of the clinic. I did not observe him closely, but did see that he appeared lifeless.

When I heard sirens coming I started to look for (b)(3) (b)(6) because I knew we needed to assist in transporting ISN 093 to the hospital. I located (b)(3) quickly, and noted she was on the phone doing something for Colonel (b)(3) (b)(6). I remember the EMTs coming in. They were both HM3s and arrived with a large stretcher and gear. One of them immediately started doing chest compressions because medical was not doing it. Right before we put ISN 093 on the EMT's stretcher, Colonel (b)(3) (b)(6) said that he wanted at least one MP to go with the detainee. (b)(3) (b)(6) and I, along with the two EMTs carried ISN 093 out to the ambulance and accompanied him to the hospital. As soon as we got into the ambulance, the corpsman started up chest compressions again. I was in the back of the ambulance with the corpsman, while (b)(3) was sent by the corpsman to find a qualified driver for the ambulance. In about three minutes (b)(3) returned with a corpsman from the clinic who drove the vehicle. The corpsmen in the back of the ambulance said they needed my help, so I pulled the detainees neck back to keep his airway open while also keeping the air mask on his mouth and compressing the air bag twice for every fifteen chest compressions given by the corpsman. I remember that it was very rough ride to the hospital. When the corpsman checked the first set of vitals in the ambulance, he said the detainee's heart was heating, and I observed this on the monitor. But I

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am not sure if his heart was beating on its own or if we were doing it. The heart beat was up and down the whole way to the hospital.

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When we were about halfway to the hospital ISN 093 started spitting up blood all over my hands. The blood was not like normal blood, it was thick and orange. I pulled back, but the corpsman said to keep going. When I pulled ISN 093's head back again the corpsman and I noticed that the detainee's neck was swollen, puffy and was a purple color. As the corpsman pushed on the detainee's neck, the corpsman seemed surprised to see that the detainee still had a piece of material wrapped tightly three or four times around his neck. The corpsman tried to put his finger in between the cloth and the detainee's neck, but the material was too tight for him to do this. I also tried to do the same thing, but without success. I know that the material was an altered sheet that was ripped into strands. I know this because detainees used to do it all the time when I worked in Camp 4, in order to make things such as clothes lines and shower curtain lines. The cloth was knotted around the detainee's neck in the front, and appeared to have been cut just above the knot. The material was not braided, but was bunched up. The corpsman cut the "rope" a bit to loosen it, but did not cut it all the way through, and it remained on the detainee's body. We continued CPR all the way to the hospital and on into the Detention/Detainee Advanced Care Unit. We were directed by medical to put ISN093 on one of the beds, where CPR was continued by the corpsman, while I used the phone to inform DOC that we had arrived. The DOC contact logged the call in at 0111. Medical surrounded ISN 093 and commenced care. I answered the phone, and a female Commander from the DET clinic was asking for the status of the detainee, but the status was uncertain at that point. The Commander called back and said that the other two were dead, and again asked for the status. One of the medical staff looked at me and held his thumb and index finger about an inch apart and said, "He's that close to death." I told the Commander we would call her back when we had a status. The head of S3 arrived with a JAG officer to assess the situation. ISN093 was pronounced dead at 0150. S3 then relieved us to go "back to the wire." From the time I was told to report to Camp 1 and the time ISN 093 was pronounced dead was probably about an hour and fifteen minutes.

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Throughout the time I have been at GTMO (this includes both rotations), I have watched the detainees be given more leeway and have more items provided to them by Command. Detainees have consistently been allowed to get away with Standard Operating Procedures (SOP) violations that have been allowed to slide by the Command. Violations include the hanging of sheets too high and altering (b)(2) When a guard observes a violation, the Guard can ask a detainee to stop what he is doing, but can do little else when a violations occurs except write the detainee up and put the incident in the system. Detainees are allowed to get away with small stuff and then this grows until they are allowed to get away with even more.

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This statement, consisting of this page and (b)(3) other pages was typed for me by (b)(3) (b)(6) (b)(7)(C) s we discussed its contents. I have read and understand the above statement. I have been given the opportunity to make any changes or corrections I desire to make and have placed my initials over the changes or corrections. This statement is true to (b)(3) (b)(6) (b)(7)(C) (b)(3)

Signature

(b)(3) (b)(6) (b)(7)(C)

Sworn to and subscribed before me this 15th day of June in the year 2006, at 1210

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Witnessed:

Representative Nava: Criminal Investigative Service
AUIH- DERIVED FROM ARTICLE 136,
UCMJ (10 U.S.C. 936) and 5 U.S.C. 303