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**DEPARTMENT OF THE ARMY**  
U.S. ARMY CRIMINAL INVESTIGATION COMMAND  
Camp Bucca CID Office  
CAMP BUCCA CID OFFICE, 3D MILITARY POLICE GROUP (CID), Camp  
Bucca, Umm Qasr, Iraq, APO AE, Iraq

07 Dec 2007

MEMORANDUM FOR: SEE DISTRIBUTION

SUBJECT: CID REPORT OF INVESTIGATION - FINAL/SSI - 0043-2007-CID579-24083 - 5H8

DATES/TIMES/LOCATIONS OF OCCURRENCES:

1. 01 OCT 2007, 0600 - 01 OCT 2007, 0700; LATRINE ENTRANCE, COMPOUND  
12E, THEATER INTERNMENT FACILITY (TIF), CAMP BUCCA, APO AE 09375, IRAQ

DATE/TIME REPORTED: 03 OCT 2007, 0800

INVESTIGATED BY:

SA (b)(6), (b)(7)(C), (b)(7)(F)

SA (b)(6), (b)(7)(C), (b)(7)(F)

SA (b)(6), (b)(7)(C), (b)(7)(F)

SA (b)(6), (b)(7)(C), (b)(7)(F)

SA (b)(6), (b)(7)(C), (b)(7)(F)

SUBJECT:

1. NONE, ; [ACCIDENTAL DEATH] (NFI)

VICTIM:

1. MUSTAF, HUSSAYN ABID (DECEASED); CIV; IRAQ; (DOB); (POB); MALE;  
OTHER; INTERNMENT SERIAL NUMBER (ISN) (b)(6), (b)(7)(C) COMPOUND 12E,  
THEATER INTERNMENT FACILITY (TIF), CAMP BUCCA, APO AE 09375, IZ; XZ ;  
[ACCIDENTAL DEATH]

INVESTIGATIVE SUMMARY:

1

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**ACLU DDII CID ROI 25566**

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“This is an Operation Iraqi Freedom Investigation”

About 0800, 3 Oct 07, SA (b)(6), (b)(7)(C) received a Memorandum of Transmittal (MOT) from the 32nd Military Police Detachment (CID), Balad, IZ, which detailed Detainee MUSTAF died.

Investigation determined Detainee MUSTAF lost his balance and fell backwards while reaching for a water bottle, which was on a ledge over the entrance to the latrine in Compound 12E. Upon impact, Detainee MUSTAF struck the back of his head on a section of cement outside of the latrine. Detainee MUSTAF was transported to the Theater Internment Facility (TIF) Hospital, Camp Bucca, where he was treated for a possible closed head injury, which consisted of intubation and therapy to reduce intracranial pressure. Detainee MUSTAF was subsequently transported to the Air Force Theater Hospital, LSA Anaconda, Balad, Iraq, where he was resuscitated. The attending physician indicated the presence of internal bleeding and no indication of external trauma. After consultation with the Neurosurgeon, it was determined Detainee MUSTAF would not recover. At 1525, 1 Oct 07, Dr (MAJ) (b)(6), (b)(7)(C) Attending Physician, 332nd EMDOS/Emergency Department, LSA Anaconda, Balad pronounced Detainee MUSTAF dead.

An autopsy by the Armed Forces Medical Examiner's Office determined the cause of death to be closed head trauma and the manner of death to be accidental. The results of this investigation are consistent with those findings.

STATUTES:

N/A

EXHIBITS/SUBSTANTIATIONS:

Attached:

1. Agents Investigation Report (AIR) of SA (b)(6), (b)(7)(C) 3 Oct 07, detailing the initial notification and canvass interviews.
2. Canvass Interview Worksheet, 3 Oct 07.

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3. AIR of SA (b)(6), (b)(7)(C) 3 Oct 07, detailing the Crime Scene Examination.
4. Photographic Packet. (Crime Scene)
5. Compact Disc containing original images associated with Exhibit 3. (USACRC, USACIDC, and file copies only)
6. Crime Scene Sketch, prepared by SA (b)(6), (b)(7)(C) 1 Oct 07.
7. AIR of SA (b)(6), (b)(7)(C) 2 Oct 07, detailing medical coordinations.
8. Photographs of Detainee MUSTAFF. (USACRC, USACIDC, and file copy only).
9. Sworn Statement of CPT (b)(6), (b)(7)(C) 1 Oct 07.
10. Sworn Statement of MAJ (b)(6), (b)(7)(C) 2 Oct 07.
11. Medical Records pertaining to Detainee (b)(6), (b)(7)(C) various dates.
12. AIR of SA (b)(6), (b)(7)(C) 20 Oct 07, detailing receipt of Final Autopsy Report.
13. Final Autopsy Report, pertaining to Detainee MUSTAF, 15 Oct 07.
14. Report of Toxicological Examination, pertaining to Detainee MUSTAF, 15 Oct 07.
15. Certificate of Death, pertaining to Detainee MUSTAF, 18 Oct 07.
16. AIR of SA (b)(6), (b)(7)(C) 15 Nov 07, detailing the receipt of the Final Information Report.
17. AIR of SA (b)(6), (b)(7)(C) 7 Oct 07, detailing the autopsy of Detainee MUSTAF.
18. Autopsy Photo's of Detainee MUSTAFF. (USACRC, USACIDC, and file copy only)

Not Attached:

None.

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The original of Exhibits 1 thru 10, 12, 16 and 17 are attached to the USACRC copy of this report. The original of Exhibit 11 is retained in the files of the 332nd EMDOS, Air Force Theater Hospital, LSA Anaconda, Balad, Iraq. The original of Exhibits 13 thru 15 and 18 are retained in the files of the Armed Forces Institute of Pathology, Rockville, MD.

STATUS: This is a Final Report. Commander's Report of Disciplinary or Administrative Action (DA Form 4833) is not required.

CID reports of investigation may be subject to a Quality Assurance review by CID higher headquarters.

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**(b)(6), (b)(7)(C)**

Special Agent

Report Approved By:

**(b)(6), (b)(7)(C)**

Special Agent in Charge

**DISTRIBUTION:**

- 1-Dir, USACRC, Ft Belvoir, VA
- 1-Commander, USACIDC, ATTN: CIOP-ZA, 6010 6th Street, Ft Belvoir, VA 22060
- 1-DIR AFIP AFME WASH, DC
- 1-AFIP DOVER OAFME
- 1-22nd MP BN (CID)(OPERATIONS)
- 1-280th MP DETACHMENT (CID), ARIFJAN, KUWAIT
- 1-31ST COMBAT SUPPORT HOSPITAL (CSH), CAMP BUCCA, UMM QASR, IRAQ, APO AE 09375
- 1-CDR, 3D MP GROUP (CID)(OPERATIONS)
- 1-COMMANDER, 705TH MP BN, TIF, UMM QASR, IRAQ, APO AE 09375
- 1-COMMANDER, FOB BUCCA, UMM QASR, IRAQ, APO AE 09375
- 1-DEPUTY COMMANDER, FOB BUCCA, UMM QASR, IRAQ, APO AE 09375
- 1-Forensic Science Officer
- 1-CAMP BUCCA CID OFFICE, 280th MP DET (CID), UMM QASR, IRAQ, APO AE 09375
- 1-STAFF JUDGE ADVOCATE, CAMP BUCCA, UMM QASR, IRAQ, APO AE 09375
- 1-FILE

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**ACLU DDII CID ROI 25570**

AGENT'S INVESTIGATION REPORT

CID Regulation 195-1

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ROI NUMBER

0043-07-CID579-24083

PAGE 1 OF 1 PAGES

BASIS FOR INVESTIGATION: About 0800, 3 OCT 07, this office received a Memorandum of Transmittal (MOT), 0148-07-CID919, from the 32<sup>nd</sup> Military Police Detachment (CID), Balad, Iraq, which detailed Detainee Hussayn A. MUSTAF, Internment Serial Number (ISN) (b)(6), (b)(7)(C) had been transported to the medical facility in Balad and died.

About 0930, 3 Oct 07, SA (b)(6), (b)(7)(C) and Mr. (b)(6), (b)(7)(C) Category Two Linguist, L-3, Titan, this office, conducted canvass interviews of detainees assigned to Compound 12E, TIF, Camp Bucca. All detainees interviewed related they observed Detainee MUSTAF loose his balance and fall backwards striking his head on the cement outside of the latrine. There were no other detainees around him when he fell. Detainee MUSTAF then went to get medical attention. (See Canvass Interview Worksheet for details)///LAST ENTRY///

TYPED AGENT'S NAME AND SEQUENCE NUMBER

SA (b)(6), (b)(7)(C), (b)(7)(F)

ORGANIZATION

280th MP Detachment (CID), Camp Bucca, APO AE 09375

SIGNATURE

FOR (b)(6), (b)(7)(C)

DATE

3 Oct 07

EXHIBIT

LAW ENFORCEMENT SENSITIVE

is Excluded From (Para. 13, AR 34-16)

ACLU DDII CID ROI 25571



# AGENT'S INVESTIGATION REPORT

ROI NUMBER

0043-07-CID579-24083

CID Regulation 195-1

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PAGE 1 OF 1 PAGES

DEATH SCENE (Verification) EXAMINATION: Between 0945 and 1015, 3 Oct 07, SA (b)(6), (b)(7)(C) conducted a death scene verification examination of the Latrine, Compound 12E, TIF, Camp Bucca.

CHARACTERISTICS OF THE SCENE: The Latrine is a grey and white in color, concrete and metal type construction building. The Latrine is a one story building, approximately 12 feet wide and 20 feet long. There were two main Entry/Exit ways (E/E) to the building. Each E/E was centered on one another on the South wall of the building. The Latrine is located in the Northeast corner of the compound due north of Building 4; Compound 12E was enclosed by a chain link type cyclone fence and concertina wire.

CONDITIONS OF THE SCENE: Compound 12E appeared to be lived in. The compound consisted of 8 caravans; Buildings 1 and 5 were located in the South portion of the compound and Buildings 4 and 8 in the North; with Buildings 2, 3, 6 and 7 in between. All buildings were centered within the compound. There were several detainees outside the caravans either walking around or sitting in groups and there were several detainees utilizing the latrine area.

ENVIRONMENTAL CONDITIONS: At the time of the death scene examination, the outside temperature was approximately 98 degrees Fahrenheit with slightly hazy skies.

FACTORS PERTINENT TO ENTRY/EXIT: Access to the building could be gained through the East E/E, located on the East wall adjacent to Caravan 3. There was also another E/E on the East wall which was located adjacent to the Latrine, which was used for Latrine maintenance purposes. The entire compound was enclosed with a chain link type cyclone fence and concertina wire.

SCENE DOCUMENTATION: SA (b)(6), (b)(7)(C) exposed digital photographs of the death scene using a Nikon Coolpix 995 digital camera with automatic flash and SA (b)(6), (b)(7)(C) drafted a crime scene sketch. (See Photographic Packet and Crime Scene Sketch for details)

COLLECTION OF EVIDENCE: No evidence was collected.

SEARCH BEYOND THE SCENE: Nothing of evidentiary value was discovered.

AGENT'S COMMENTS: About 1015, 3 Oct 07, SA (b)(6), (b)(7)(C) attempted to prepare a complete death scene examination of Compound 12E, TIF, Camp Bucca; however, due to a lack of security within the TIF compounds, a death scene examination was unable to be thoroughly completed. Security forces infrequently enter the compound and much of the daily happenings rest with the detainee leadership. A security force of adequate size was unable to provide; therefore, all documentation was completed from the entry control point (ECP) and the observation towers of Compound 12E. ///LAST ENTRY///

TYPED AGENT'S NAME AND SEQUENCE NUMBER		ORGANIZATION	
SA (b)(6), (b)(7)(C), (b)(7)(F)		280th MP Detachment (CID), Camp Bucca, APO AE 09375	
SIGNATURE	(b)(6), (b)(7)(C)	EXHIBIT	
FOR:		Oct 07	3
CID FORM		RECEMENT SENSITIVE	

ACLU DDII CID ROI 25573



FOR OFFICIAL USE ONLY LAW ENFORCEMENT SENSITIVE  
PHOTOGRAPHIC PACKET

CASE NUMBER: 0043-07-CID579-24083

<u>NUMBER</u>	<u>DESCRIPTION OF PHOTOGRAPH</u>
1	<u>DSCN0681</u> : Establishing Photograph of Compound 12
2	<u>DSCN0667</u> : Photograph depicting the North wall of Compound 12E with Latrine in Northeast corner.
3	<u>DSCN0656</u> : Photograph depicting the Northeast corner of Compound 12E.
4	<u>DSCN0680</u> : Photograph depicting the Northeast corner of Compound 12E.
5	<u>DSCN0674</u> : Photograph depicting the North wall of Compound 12E.
6	<u>DSCN0675</u> : Photograph depicting the Northwest corner of Compound 12E.
7	<u>DSCN0676</u> : Photograph depicting the West wall of Compound 12E.
8	<u>DSCN0677</u> : Photograph depicting the South wall of Compound 12E.

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ACLU RDI CID ROI 25574

Exhibit \_\_\_\_\_

**FOUO**

LAW ENFORCEMENT SENSITIVE

0043 07 CID579 24083

*Crime Scene Photos*

0043 07 CID579 24083

**FOUO**

EXHIBIT 5

LAW ENFORCEMENT SENSITIVE

**ACLU DDII CID ROI 25575**



ACLU DDII CID ROI 25581



ACLU DDII CID ROI 25582



ACLU DDII CID ROI 25585

0043 07 CID579 24083

**FOUO**

LAW ENFORCEMENT SENSITIVE

Photos - ALL

0043 07 CID579 24083

**FOUO**

LAW ENFORCEMENT SENSITIVE

**EXHIBIT**

5

**ACLU DDII CID ROI 25586**



ACLU DDII CID ROI 25607



ACLU DDII CID ROI 25609



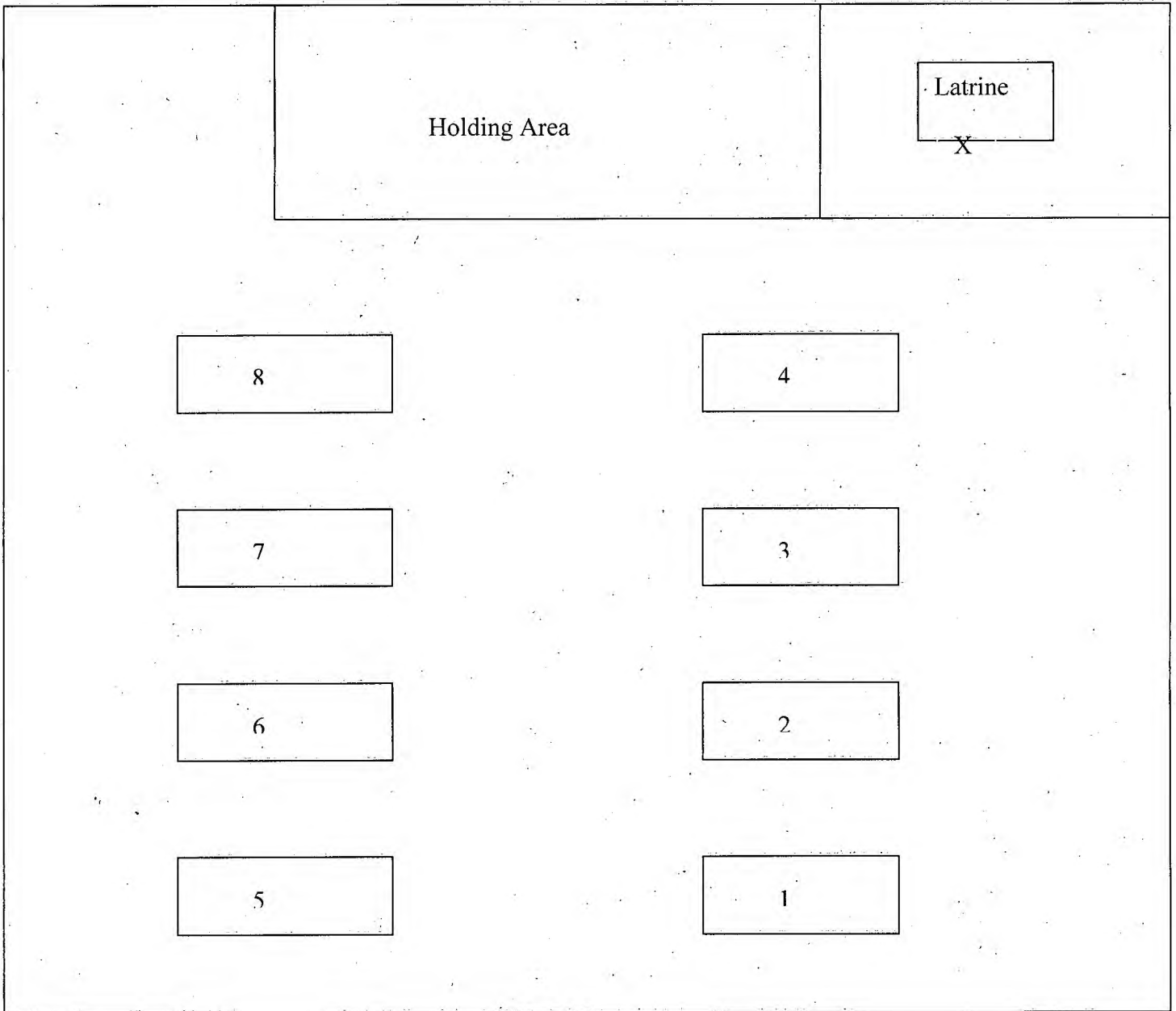


ACLU DDII CID ROI 25614



ACLU DDII CID ROI 25615

ROUGH CRIME SCENE SKETCH OF COMPOUND 12E  
FOR OFFICIAL USE ONLY - LAW ENFORCEMENT SENSITIVE



LEGEND

X: Location of Incident



NOT TO SCALE

TITLE BLOCK

Case Number: 0043-07-CID579-24083  
 Offense: Undetermined Death  
 Date/Time: 1 Oct 07/0600  
 Location: Latrine, Compound 12E, TIF,  
 Camp Bucca, Iraq, APO AE 09375  
 Subject: Unknown  
 Victim: Hussayn ALI MUSTAF  
 Sketched By: SA (b)(6), (b)(7)(C)  
 Verified By: SA (b)(6), (b)(7)(C)

ACLU DDII CID ROI 25616

# AGENT'S INVESTIGATION REPORT

ROI NUMBER

0148-07-CID919

CID Regulation 195-1

PAGE 1 OF 1 PAGE

DETAILS

**BASIS FOR INVESTIGATION:** This investigation was initiated upon notification by SGT (b)(6), (b)(7)(C) Mortuary Affairs, LSA Anaconda, Balad Iraq who stated she had recently received the body of an Iraqi National Detainee at the morgue, who was wearing a bracelet stating he was of "Special Detainee Status". SGT (b)(6), (b)(7)(C) related the paperwork from the hospital detailed the individual had been transferred from Camp Bucca to the hospital in Balad at 1354, 1 Oct 07, for injuries sustained to the head from a fall. The individual had been incubated and life saving measures taken. The individual suffered a subdural hemotoma and eventually succumbed to the injury and was pronounced dead at 1525, 01 Oct 07 local time by MAJ (DR) (b)(3) (b)(6), (b)(7)(C) 332<sup>nd</sup> EMDOS / Emergency Department, LSA Anaconda, Balad Iraq APO AE 09391

About 1745, 01 Oct 07, SA (b)(6), (b)(7)(C), (b)(7)(F) and SA (b)(6), (b)(7)(C), (b)(7)(F) from this office coordinated with SGT (b)(6), (b)(7)(C) and exposed photographic images of the deceased detainee with a Nikon 995 with built in flash.

About 1750, 01 Oct 07, SA (b)(6), (b)(7)(C), (b)(7)(F) this office, interviewed CPL (b)(6), (b)(7)(C) (b)(6), (b)(7)(C) Alpha Troop, 1-58<sup>th</sup> Cavalry (CAV), Camp Bucca, Iraq, who stated that about 1030, 01 Oct 07 he was selected by his unit to transport the detainee to Balad for further medical treatment. CPL (b)(6), (b)(7)(C) additionally stated he received a detailed brief pertaining to the detainee, but did not witness the detainee sustain any injuries. CPL (b)(6), (b)(7)(C) further stated he witnessed the medical personnel at Balad provide life saving measures on the detainee prior to him expiring.

About 1810, 01 Oct 07, SA (b)(6), (b)(7)(C) interviewed SPC (b)(6), (b)(7)(C), (b)(6), (b)(7)(C) Alpha Troop, 1-58<sup>th</sup> CAV, Camp Bucca, Iraq, who stated that about 1030, 01 Oct 07 he was selected by his unit to transport the detainee to Balad for further medical treatment. SPC (b)(6), (b)(7)(C) additionally stated he received a detailed brief pertaining to the detainee, but did not witness the detainee sustain any injuries. SPC (b)(6), (b)(7)(C) further stated he witnessed the medical crews provide continuous treatment to the detainee during the entire flight. SPC (b)(6), (b)(7)(C) further stated he witnessed the medical personnel at Balad provide life saving measures on the detainee prior to him expiring.

About 1830, 01 Oct 07, SA (b)(6), (b)(7)(C) interviewed CPT (b)(6), (b)(7)(C), (b)(6), (b)(7)(C) 31<sup>st</sup> CSH, TF 31, Camp Bucca, Iraq, who provided a sworn statement detailing the life saving measures he performed on the detainee while in flight from FOB Bucca to LSA Anaconda, Iraq (See Sworn Statement for details).

About 1400, 2 Oct 07, SA (b)(6), (b)(7)(C), (b)(7)(F) this office interviewed MAJ (b)(6), (b)(7)(C) who provided a sworn statement detailing the lifesaving techniques used to try and revive the detainee, Mr. Hussayn A. MUSTAF, (b)(6), (b)(7)(C) Bucca, Iraq. Mr. MUSTAF was pronounced dead at 1525, 01 Oct 07 (See Sworn Statement for Details).///Last Entry///

TYPED AGENT'S NAME AND SEQUENCE NUMBER

SA (b)(6), (b)(7)(C), (b)(7)(F)

ORGANIZATION

32nd MP Det (CID)  
LSA Anaconda, Balad, Iraq APO AE 09391

SIGNATURE

(b)(6), (b)(7)(C)

DATE

2 Oct 07

EXHIBIT

ACLU DDII CID ROI 25617

FOUO

SWORN STATEMENT

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

PRIVACY ACT STATEMENT SENSITIVE  
LAW ENFORCEMENT SENSITIVE

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 LSA Anaconda, Balad, Iraq PAD office, Air Force Theater Hospital	2. DATE (YYYYMMDD) 20071001	3. TIME 1900	4. FILE NUMBER
5. LAST NAME FIRST NAME MIDDLE NAME (b)(6), (b)(7)(C)	6. SSN (b)(6), (b)(7)(C)	7. GRADE/STATUS (b)(6), (b)(7)(C) 03 / CPT	
8. ORGANIZATION OR ADDRESS 31st CSH, TF 31, Camp Bucca			
9. I, (b)(6), (b)(7)(C), WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:			

(b)(6), (b)(7)(C) The patient in question arrived at the Bucca TIF EMT @ approximately 0630 this AM with report of head injury status-post falling out of a wheelchair and striking his head. On arrival the pt was Alert & oriented, able to move all extremities, He began becoming restless & having constant emesis, indicative of closed head injury. Pt was intubated by the ER Physician and therapy to reduce intracranial pressure initiated arrangements were made to transfer pt to Balad by Air medevac. Pt was intubated @ 7.5 Fr ET tube, O2 sat @ 100%. The ER MD placed a large bore central line in @ groin, an arterial line in @ Radial Artery, and a peripheral IV in @ Forearm. a 16 French Foley cath was placed with @ Urine Return. An 18 French NGT was placed via the @ Nare. Pt was transported from Bucca to Tallil via NAVY MEDEVAC. Pt was transferred to 3RD ID MEDEVAC MH-60 to complete the trip to Balad. The patient remained stable throughout the transport and was delivered to the medical team at Balad Hospital. Pt was stable but critical. I departed to go to the PAD to arrange transport back to Bucca. Approximately one hour later I was advised that the patients condition had deteriorated and the patient had expired. (b)(6), (b)(7)(C)

NOTHING FOLLOWS

10. EXHIBIT	11. INITIALS OF STATEMENT (b)(6), (b)(7)(C)	PAGE 1 OF 2 PAGES
-------------	--	-------------------

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

FOUO  
ACLU DDII CID ROI 25652

STATEMENT OF (b)(6), (b)(7)(C) LAW ENFORCEMENT SENSITIVE TAKEN AT LSA Anacanda DATED 20071001

9. STATEMENT (Continued)

[Large redacted area with a large 'X' across it]

(b)(6), (b)(7)(C)

(b)(6), (b)(7)(C)

AFFIDAVIT

I, (b)(6), (b)(7)(C), 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 THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE,

(b)(6), (b)(7)(C)

WITNESSES:

Subs  
administer oaths, this 01 day of OCT, 07  
at PAO, LSA Anacanda, Bahad, Iraq

(b)(6), (b)(7)(C), (b)(7)(F)

ORGANIZATION OR ADDRESS

(Typed Name of Person Administering Oath)

USC 10 & 936

(Authority To Administer Oaths)

ORGANIZATION OR ADDRESS

FOUO

INITIALS OF PERSON MAKING STATEMENT

ACLU DDII CID ROI 25653

LAW ENFORCEMENT SENSITIVE

EXHIBIT 9

USAPA V1.00

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SWORN STATEMENT

File Number : 0148-07-CID919  
Location : 32nd MP Det (CID), LSA Anaconda, Iraq, APO AE 09391  
Date : 2 Oct 07 (b)(6), (b)(7)(C) Time: 1431 (b)(6), (b)(7)(C)  
Statement of : (b)(6), (b)(7)(C) GRADE/STATUS: MAJ/AD  
SSN : (b)(6), (b)(7)(C)  
Unit : 332nd EMDOS-Emergency Department, Air Force Theater Hospital, LSA  
Anaconda, APO AE 09391

(b)(6), (b)(7)(C)

I, (b)(6), (b)(7)(C) WANT TO MAKE THE FOLLOWING STATEMENT UNDER

OATH: On 1 October 2007 an older Iraqi male presented at 1354 to the Balad Emergency Department. We had received a call earlier in the day from Camp Bucca informing us that this patient had fallen out of his wheelchair and had hit his head. On a Cat Scan (CT) performed at Camp Bucca he had a complex head bleed and a Glasco Coma Scale (GCS) of 10. He was intubated at Camp Bucca and then transported to the Balad Air Force Theater Hospital by rotary wing to be seen and evaluated by Neurosurgery. When the patient arrived he was intubated, had no spontaneous movement, was oxygenating well but was hypotensive. We initially resuscitated the patient with IV fluids and started a dopamine drip. The blood pressure responded. The trauma evaluation revealed no signs of trauma. The head, neck, chest, abdomen, upper and lower extremities were all normal on exam. The repeat head CT at Balad showed a significant head bleed with midline shift. No fractures of the head or cervical spine were noted. The neurosurgeon, Dr. (b)(6), (b)(7)(C) was consulted at this time and after reviewing the CT felt that the significant head bleed was not compatible with life. We reviewed the medical notes to confirm that there were no medications that could explain why the patient was showing no spontaneous movement. According to the medical notes from Camp Bucca the patient had received a paralytic agent at 0830, but had not received any further paralytics. The effects of the paralytic medication last 60 minutes and could not explain why there was no spontaneous movement. We gave the patient 2mg of Narcan to reverse any possible effects from fentanyl or morphine. The patient still had no spontaneous movement to painful stimuli, no gag reflex, and a dilated and unresponsive eye on the right. His left eye was blind and scarred from a prior injury. The findings of the head CT and physical exam confirmed that the head bleed sustained by the patient was not compatible with life. At this time in consultation with Neurosurgery the patient was made expectant and comfort care measures were started. He was extubated, IVs stopped and morphine given for comfort. The chaplain was called and he was at the bedside along with a translator within minutes. After approximately 10 minutes the patient expired and was pronounced dead by Dr. (b)(6), (b)(7)(C) Major, USAF, MC Emergency Physician at 1525. The body was wrapped and transported to the morgue. CID was notified within an hour of the patient expiring.

Q: Were there any signs of external trauma on the patient?

A: No. His head was full of blood, but that was internal and there were no signs indicating that someone had assaulted him. Patients can hit their head and at that age it is not surprising to have internal bleeding.

Q: In your professional opinion, were there any signs of foul play?

A: No. There is nothing that strikes me as suspicious about the patients death.

Q: What was reported to you about why the patient was there? (b)(6), (b)(7)(C)

INITIALS (b)(6), (b)(7)(C)  
ACLU-RDI 5553

ACLU DDII CID ROI 25654

Statement of (b)(6), (b)(7)(C), taken at LSA Anaconda, Iraq, dated 2 Oct 07,  
Continued:

(b)(6), (b)(7)(C)

A: We were told that the man fell from his wheelchair and hit his head. There was nothing to indicate that he fell from a greater distance, was tortured, shot or injured in any other way.

Q: Is there anything you would like to add to this statement at this time?

A: No. (b)(6), (b)(7)(C)

////////////////////END OF STATEMENT////////////////////////////////////

**AFFIDAVIT**

I, (b)(6), (b)(7)(C) 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

IN (b)(6), (b)(7)(C)

(S)

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 2nd day of Oct 2007, at LSA Anaconda, Iraq, APO AE 09391.

(b)(6), (b)(7)(C)

SA (b)(6), (b)(7)(C), (b)(7)(F)

Typed Name of Person Administering Oath  
10 USC 936 (Authority To Administer Oaths)

Witness

(b)(6), (b)(7)(C)



LAW ENFORCEMENT SENSITIVE

AGENT'S INVESTIGATION REPORT	ROI NUMBER 0043-07-CID579-24083
CID Regulation 195-1 For Official Use Only-Law Enforcement Sensitive	PAGE 1 OF 1 PAGES

About 0630, 20 Oct 07, this office received the Final Autopsy Examination Report, report number: ME 07-1192, Certificate of Death, and the toxicology report from the Armed Forces Institute of Pathology (AFIP), Rockville, MD, pertaining to Detainee MUSTAF. The Final Autopsy Report and the Certificate of Death indicated the cause of death to be closed head trauma and the manner of death to be accidental. (See Final Autopsy Report, Certificate of Death, and Toxicology Report for details)

//////////////////////////////////////LAST ENTRY//////////////////////////////////////

TYPED AGENT'S NAME AND SEQUENCE NUMBER (b)(6), (b)(7)(C), (b)(7)(F) SA [REDACTED]	ORGANIZATION 280th MP Detachment (CID), Camp Bucca, APO AE 09375
[REDACTED]	DATE 20 Oct 07 EXHIBIT

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**ARMED FORCES INSTITUTE OF PATHOLOGY**  
 Office of the Armed Forces Medical Examiner  
 1413 Research Blvd., Bldg. 102  
 Rockville, MD 20850



(b)(6)

**FINAL AUTOPSY REPORT**

Name: MUSTAF, Hussayn Abid  
 ISN: (b)(6)  
 Date of Birth: (b)(6) 1940 (66 years)  
 Date of Death: (b)(6) 2007  
 Date of Autopsy: (b)(6) 2007, 1330 hours  
 Date of Report: 15 OCT 2007

Autopsy No.: (b)(6)  
 AFIP No.: (b)(6)  
 Rank: Iraqi Detainee  
 Place of Death: Balad, Iraq  
 Place of Autopsy: Dover Port Mortuary  
 Dover AFB, Dover, DE

**Circumstances of Death:**

CID investigation revealed that on (b)(6) 2007, detainee Mustaf had lost his balance while reaching for a water bottle on a ledge over the entrance of the latrine, falling backward and striking his head on the cement floor. Detainee Mustaf then requested medical attention. Several detainees witnessed the fall. No detainees were in the direct vicinity of the detainee Mustaf when he fell. Detainee Mustaf was conscious and walking on his own when he went to the hospital.

**Authorization for Autopsy:** Office of the Armed Forces Medical Examiner, IAW 10 USC 1471

**Identification:**

Detainee Hussayn Abid Mustaf is identified by transportation documents and the accompanied CID Investigation Report. Fingerprints, dental radiographs and a sample for DNA identification are obtained on (b)(6) 2007.

**CAUSE OF DEATH:**

Closed Head Trauma

**MANNER OF DEATH:**

Accident

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AUTOPSY REPORT (b)(6)

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MUSTAF, Hussain

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EXTERNAL EXAMINATION

The unclad body is that of a well-developed, well-nourished Caucasian male with no external evidence of trauma. The body weighs 164 pounds and is approximately 69" in length. The external appearance is consistent with the reported age of 66 years.

The head is normocephalic with no gross evidence of trauma. The scalp hair is gray, with prominent male baldness. A grey mustache and stubble beard are also noted. The eyelids are unremarkable with no apparent trauma. The eyes are unremarkable. The irides are pale and grayish. The corneae are whitish and cloudy. The sclerae are white with no apparent hemorrhage or petechiae. The external auditory canals, external nares and oral cavity are free of foreign material or apparent trauma. The nasal skeleton is palpably intact. The tongue is unremarkable with no significant trauma or evidence of sharp force injuries. The lips are unremarkable with no apparent injury. The teeth are natural, in poor condition and many are remotely missing. The neck is unremarkable with no evidence of trauma or abnormality.

The chest is unremarkable. No injury of the ribs or sternum is evident externally. The abdomen is unremarkable with no evidence of trauma or major surgical scars. The back is unremarkable with no evidence of trauma or gross abnormality. The external genitalia are those of an adult circumcised male with unremarkable descended testes.

The extremities are unremarkable with no evidence of trauma or gross abnormality. A slightly deformed left external ear and a deep scar of the left side of the face are noted, consistent with a history of remote firearm injury. The scar extends from the cheek bone to the external auditory canal. No tattoos, major surgical or characteristic scars or other identifying marks are noted.

EVIDENCE OF INJURY

No evidence of injury is noted on external examination except a small area of possible superficial contusion on the right side of the face which is of questionable clinical significance. Careful dissection of the extremities and the back reveal no evidence of recent or remote trauma or skeletal fractures. Examination of the neck with layer-by-layer dissection of the strap muscles reveals no evidence of trauma.

**A. Injuries of the Head:**

Examination of the head reveals no external evidence of trauma. A small contusion of the left forehead is noted. No other contusions, abrasions or gross evidence of trauma is noted. Reflection of the scalp reveals significant left parietal subgaleal and temporalis muscle hemorrhage. Reflection of the left temporalis muscle reveals linear fracture of the parietal bone extending anteriorly and downward into the left anterior cranial fossa and posteriorly to the left side of the occipital bone. Removal of the skull cap reveals left epidural hemorrhage of an estimated 10-15 cc of blood. Bilateral subdural hemorrhage is noted, more prominent on the left side. Removal of the brain reveals marked bilateral hemorrhage under the frontal lobes, more prominent on the left side and marked necrosis of the left frontal lobe. Diffuse bilateral subarachnoid hemorrhage is noted as well as around the cerebellum.

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**B. Remote Firearm Injury to the Face:**

Examination of the left face reveals a prominent depressed scar of the cheek, extending from the cheek bone to the left external auditory canal, measuring 2 1/2 x 1/4", and is associated with deformity of the left external ear. Reflection of the face reveals presence of marked scarring of the underlying tissue and muscle. Two round metal fragments (? pellets) are recovered, photographed, submitted as evidence and retained by OAFME. Multiple similar metallic fragments are noted on radiographs but their recovery would have lead to mutilation of the face and were not recovered.

**INTERNAL EXAMINATION**

**BODY CAVITIES:**

The body is opened by the usual thoraco-abdominal incision and the chest plate is removed. No adhesions or abnormal collections of fluid are present in any of the body cavities. All body organs are present in the normal anatomical position. There is no internal evidence of blunt force or penetrating injury to the thoraco-abdominal region. No abnormal collection of blood or fluid is noted in the body cavities.

**HEAD: (CENTRAL NERVOUS SYSTEM)**

The scalp is reflected. Closed head traumatic injuries are noted above. No non-traumatic abnormality is noted. The brain weighs 1310 grams.

**NECK:**

Examination and dissection of the soft tissues of the neck, layer-by-layer, reveals no abnormal mobility or evidence of trauma. The thyroid cartilage and hyoid bone are intact.

**CARDIOVASCULAR SYSTEM:**

The pericardium is intact. The pericardial sac is free of fluid and adhesions. The coronary arteries arise normally, follow the usual distribution and are patent, without evidence of excessive atherosclerosis. The left main coronary artery reveals 15% atherosclerotic narrowing. The chambers and valves exhibit the usual size-position relationship and are unremarkable. The myocardium is pale brown and reveals marked postmortem changes. The atrial and ventricular septae are intact. The aorta and its major branches arise normally, follow the usual course and are unremarkable without significant atherosclerosis and other abnormality. The venae cavae and their major tributaries return to the heart in the usual distribution and are free of thrombi. The heart weighs 340 grams.

**RESPIRATORY SYSTEM:**

The upper airway is clear of debris and foreign material; the mucosal surfaces are unremarkable. The pleural surfaces are unremarkable bilaterally. The pulmonary parenchyma is congested and edematous red-grey and reveals no focal lesions. The

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AUTOPSY REPORT (b)(6)

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MUSTAF, Hussayn Abid

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pulmonary arteries are normally developed, patent and without thrombus or embolus. The right and left lung weigh 810 grams and 800 grams, respectively.

**LIVER & BILIARY SYSTEM:**

The hepatic capsule is smooth and intact, covering dark brown parenchyma with no apparent focal lesions. The gallbladder is intact and contains green bile and no stones. The extrahepatic biliary tree is without evidence of calculi. The liver weighs 1280 grams.

**ALIMENTARY TRACT:**

The tongue exhibits no evidence of injury. The esophagus is lined by gray-white mucosa. The gastric mucosa is unremarkable with unremarkable rugal folds. The lumen contains 20 ml of brownish fluid, submitted for toxicology. The small and large bowel is unremarkable. The pancreas is autolysed. The appendix is present and unremarkable.

**GENITOURINARY SYSTEM:**

The renal capsules are smooth and thin and strip with ease from the underlying renal smooth brown cortical surfaces. The cortices are delineated from the medullary pyramids, and unremarkable. The calyces, pelves and ureters are unremarkable. The urinary bladder mucosa is unremarkable and contains no urine. The right and left kidneys weigh 130 and 120 grams, respectively. The external genitalia are those of an adult circumcised male with unremarkable testes.

**RETICULOENDOTHELIAL SYSTEM:**

The spleen has a smooth, intact capsule covering pasty purple parenchyma; and grossly unremarkable. No enlarged lymph nodes are seen. The spleen weighs 180 grams.

**ENDOCRINE SYSTEM:**

The pituitary, thyroid and adrenal glands are grossly unremarkable.

**MUSCULOSKELETAL SYSTEM:**

Muscle development is normal. No non-traumatic bone or joint abnormalities are noted. See "Evidence of Injury".

**EVIDENCE COLLECTION**

Two gray metallic spheres, pellets are recovered from the left facial subcutaneous tissue, photographed for documentation, submitted as evidence and retained by OAFME.

**IDENTIFYING MARKS**

A deep left facial scar consistent with a remote firearm injury is noted. No tattoos, major surgical scars or other identifying marks are noted.

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AUTOPSY REPORT (b)(6)

MUSTAF, Hussayn Abid

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**NATURAL DISEASES**

Mild coronary atherosclerosis is noted. No evidence of other natural diseases is identified during the autopsy examination.

**MEDICAL INTERVENTION**

Multiple intravenous access lines are noted in the left antecubital fossa, right wrist and left inguinal area, and a urinary catheter are noted.

**POSTMORTEM CHANGES**

Rigor is equal in all extremities. Livor is consistent with supine position. Body temperature is cold due to refrigeration.

**TOXICOLOGY**

- A. Volatiles (Blood and Vitreous fluid):
- No ethanol was detected.
- D. Screened drugs of abuse and medications:
- Lidocaine: detected and confirmed.
  - Benzodiazepine (Midazolam): 0.14 mg/L
  - Benzodiazepine (1-Hydroxymidazolam): 0.057 mg/L

**ADDITIONAL PROCEDURES**

- Documentary photographs are taken by an OAFME photographer.
- Full body radiographs and computerized body scans are obtained.
- Specimens retained for toxicological and/or DNA identification are: Blood, vitreous fluid, bile, urine, gastric contents, and tissue samples from liver, lung, kidney, spleen, brain, psoas and heart muscles, and adipose tissue.
- Representative sections of organs are retained in formalin for microscopic examination if needed in the future.
- Evidence recovered is retained by OAFME.
- Review of the available medical records.

**FINAL AUTOPSY DIAGNOSIS**

**I. Closed Head Trauma:**

- Left parietal skull fracture.
- Left epidural hemorrhage.
- Bilateral subdural hemorrhage, left > right.
- Diffuse bilateral subarachnoid hemorrhage, left > right.
- Marked necrosis of the left frontal lobe.

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AUTOPSY REPORT (b)(6)  
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**II. Remote Facial Trauma:**

- Well-healed firearm injury of the left face.

**III. Toxicology:** Lidocaine and Benzodiazepine were detected and confirmed. "See toxicology results above). Negative for ethanol and drugs of abuse.

**IV. Evidence:** Two metallic spheres pellets are recovered and retained by OAFME.

**OPINION**

The remains of believed to be (BTB) Hussayn Abid Mustaf, an Iraqi detainee, reveal injuries consistent with a reported and witnessed fall. The closed head trauma caused skull fractures, extensive intracranial hemorrhages and necrosis of the left frontal lobe. No evidence of other acute trauma is present. A remote (old) well healed scar of a firearm injury is noted. Toxicological studies reveal the presence of Lidocaine and Benzodiazepines which may be related to medical treatment, and is non-contributory to his death. No ethanol or drugs of abuse are detected. Manner of death is "Accident".

(b)(6)  
09  
(b)(6) Medical Examiner (b)(6)

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DEPARTMENT OF DEFENSE  
ARMED FORCES INSTITUTE OF PATHOLOGY  
WASHINGTON, DC 20306-6000

REPLY TO  
ATTENTION OF

AFIP-CME-T

PATIENT IDENTIFICATION

AFIP Accessions Number      Sequence  
(b)(6)                              (b)(6)

Name  
MUSTAF, HUSSAYN

SSAN:                              Autopsy: (b)(6)  
Toxicology Accession #: (b)(6)  
Date Report Generated:              2007

TO:

OFFICE OF THE ARMED FORCES MEDICAL  
EXAMINER  
ARMED FORCES INSTITUTE OF PATHOLOGY  
WASHINGTON, DC 20306-6000

CONSULTATION REPORT ON CONTRIBUTOR MATERIAL

AFIP DIAGNOSIS              REPORT OF TOXICOLOGICAL EXAMINATION

Condition of Specimens: GOOD

Date of Incident: (b)(6) 2007      Date Received: (b)(6) /2007

**VOLATILES:** The **BLOOD AND VITREOUS FLUID** were examined for the presence of ethanol at a cutoff of 20 mg/dL. No ethanol was detected.

**DRUGS:** The **URINE** was screened for amphetamine, antidepressants, antihistamines, barbiturates, benzodiazepines, cannabinoids, chloroquine, cocaine, dextromethorphan, lidocaine, narcotic analgesics, opiates, phencyclidine, phenothiazines, sympathomimetic amines and verapamil by gas chromatography, color test or immunoassay. The following drugs were detected:

**Positive Lidocaine:** Lidocaine was detected in the urine by gas chromatography and confirmed by gas chromatography/mass spectrometry.

**Positive Benzodiazepine:** Midazolam was detected in the urine by gas chromatography and confirmed by gas chromatography/mass spectrometry. The blood contained 0.14 mg/L of midazolam as quantitated by gas chromatography/mass spectrometry.

**Positive Benzodiazepine:** 1-Hydroxymidazolam was detected in the urine by gas chromatography/mass spectrometry. The blood contained 0.057 mg/L of 1-hydroxymidazolam as quantitated by gas chromatography/mass spectrometry.

(b)(6)

Office of the Armed Forces Medical Examiner

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FREEDOM OF INFORMATION Act Exemption No. 6c, d Applies*

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**CERTIFICATE OF DEATH (OVERSEAS)**

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NAME OF DECEASED (Last, First, Middle) Nom du décédé (Nom et prénoms) <b>BTB Mustaf, Hussayn,</b>		GRADE Grade <b>Civilian</b>	BRANCH OF SERVICE Arme <b>Civilian</b>	SOCIAL SECURITY NUMBER Numéro de l'Assurance Social <b>(b)(6)</b>
ORGANIZATION Organisation	NATION (e.g., United States) Pays <b>Iraq</b>	DATE OF BIRTH Date de naissance <b>(b)(6)</b> <b>1940</b>	SEX Sexe <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
RACE Race <input checked="" type="checkbox"/> CAUCASOID Caucasique		MARITAL STATUS État Civil SINGLE Célibataire		RELIGION Culte PROTESTANT Protestant
NEGROID Negroïde		MARRIED Marié		CATHOLIC Catholique
OTHER (Specify) Autre (Spécifier)		WIDOWED Veuf		JEWISH Juif
NAME OF NEXT OF KIN Nom du plus proche parent		RELATIONSHIP TO DECEASED Parenté du décédé avec le sus		
STREET ADDRESS Domicile à (Rue)		CITY OR TOWN OR STATE (Include ZIP Code) Ville (Code postal compris)		
<b>MEDICAL STATEMENT Déclaration médicale</b>				
CAUSE OF DEATH (Enter only one cause per line) Cause du décès (N'indiquer qu'une cause par ligne) <b>Closed head trauma</b>				INTERVAL BETWEEN ONSET AND DEATH Intervalle entre l'attaque et le décès <b>Hours</b>
DISEASE OR CONDITION DIRECTLY LEADING TO DEATH Maladie ou condition directement responsable de la mort.				
ANTECEDENT CAUSES Symptômes précurseurs de la mort.	MORBID CONDITION, IF ANY, LEADING TO PRIMARY CAUSE Condition morbide, s'il y a lieu, menant à la cause primaire			
	UNDERLYING CAUSE, IF ANY, GIVING RISE TO PRIMARY CAUSE Condition morbide, s'il y a lieu, menant à la cause primaire			
OTHER SIGNIFICANT CONDITIONS Autres conditions significatives				
MODE OF DEATH Condition de décès	AUTOPSY PERFORMED Autopsie effectuée <input checked="" type="checkbox"/> YES Oui <input type="checkbox"/> NO Non	CIRCUMSTANCES SURROUNDING DEATH DUE TO EXTERNAL CAUSES Circonstances de la mort suscitées par des causes extérieures		
<input checked="" type="checkbox"/> ACCIDENT Mort accidentelle	MAJOR FINDINGS OF AUTOPSY Conclusions principales de l'autopsie			
SUICIDE Suicide	NAME OF PATHOLOGIST Nom du pathologiste <b>(b)(6)</b>			
HOMICIDE Homicide	SIGNATURE Signature <b>(b)(6)</b>	DATE Date <b>(b)(6)</b> 2007	AVIATION ACCIDENT Accident à Avion <input type="checkbox"/> YES Oui <input checked="" type="checkbox"/> NO Non	
DATE OF DEATH (day, month, year) Date de décès (le jour, le mois, l'année) <b>(b)(6)</b> 2007 1525	PLACE OF DEATH Lieu de décès <b>Iraq</b>			
I HAVE VIEWED THE REMAINS OF THE DECEASED AND DEATH OCCURRED AT THE TIME INDICATED AND FROM THE CAUSES AS STATED ABOVE. J'ai examiné les restes mortels du dé funt et je conclus que le décès est survenu à l'heure indiquée et à la suite des causes énumérées ci-dessus.				
NAME OF MEDICAL OFFICER Nom du médecin militaire ou du médecin sanitaire <b>(b)(6)</b>		TITLE OR DEGREE Titre ou diplômé <b>Medical Examiner</b>		
INSTALLATION OR ADDRESS Installation ou adresse <b>Dover AFB, Dover DE</b>		<b>(b)(6)</b>		
DATE Date <b>(b)(6)</b> /2007	SIGNATURE Signature <b>(b)(6)</b>			

1 State disease, injury or complication which caused death, but not mode of dying such as heart failure etc.  
2 State conditions contributing to the death, but not related to the disease or condition causing death.

1 Préciser la nature de la maladie, de la blessure ou de la complication qui a contribué à la mort, mais non la manière de mourir, telle qu'un arrêt du cœur, etc.  
2 Préciser la condition qui a contribué à la mort, mais n'ayant aucun rapport avec la maladie ou à la condition qui a provoqué la mort.

REPLACES DA FORM 3565, 1 JAN 72 AND DA FORM 3565-R(PAS), 26 SEP 75, WHICH ARE OBSOLETE.

FORM DD 1 APR 77 **2064**

ACLU-RDI 5553 p.33

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Exhibit 000153

AGENT'S INVESTIGATION REPORT

ROI NUMBER

0043-07-CID579-24083

CID Regulation 195-1

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PAGE 1 OF 1 PAGES

About 1420, 15 Nov 07, SA (b)(6), (b)(7)(C) received the Final Information Report (FIR) from SA (b)(6), (b)(7)(C) (b)(6), (b)(7)(C) Special Agent in Charge (SAC), Aberdeen Proving Ground (APG) Resident Agency (RA), 2201 Aberdeen Boulevard, APG, MD 21005-5001, containing the AIR of SA (b)(6), (b)(7)(C) APG RA, APG, MD 21005-5001, autopsy images and fingerprints of Detainee MUSTAF. (See AIR of SA (b)(6), (b)(7)(C) and autopsy images for details) ///LAST ENTRY///

TYPED AGENT'S NAME AND SEQUENCE NUMBER

SA (b)(6), (b)(7)(C), (b)(7)(F)

ORGANIZATION

68th MP Detachment (CID), Camp Bucca, APO AE 09375

SIGNATURE

(b)(6), (b)(7)(C)

DATE

15 Nov 07

EXHIBIT

ACLU DDII CID ROI 25686

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Marking is Excluded From  
Classification (Para 13, AR 34-16)

ACLU

000114

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AGENT'S INVESTIGATION REPORT CID Regulation 195-1	ROI NUMBER 0221-07-CID112
	PAGE 1 OF 1 PAGE

DETAILS

**BASIS FOR INVESTIGATION:** On 3 Oct 2007, this office received a Request for Assistance (RFA) from SA (b)(6), (b)(7)(C) Camp Bucca CID Office, 22MP BN (CID), 280<sup>th</sup> MP DET (CID), Camp Bucca, Umm Qasr, Iraq APO AE 09375. The request required this office to attend the autopsy of Detainee Hussayn A. MUSTAF, (b)(6), (b)(7)(C) Compound 12E, TIF, Camp Bucca, Iraq, 09375, who died while in custody.

About 1315, 7 Oct 07, SA (b)(6), (b)(7)(C) attended the autopsy of Detainee MUSTAF which was conducted by Dr. (Col), (b)(6), (b)(7)(C), (b)(6), (b)(7)(C) Office of Armed Forces Medical Examiner (OFAME), Armed Forces Institute of Pathology (AFIP), 1413 Research Blvd, Bldg 102, Rockville, MD 20850. The preliminary cause of death was opined as closed head trauma and the manner was pending further medical review. Photographers from AFIP exposed digital photographs of the autopsy and prepared a compact disc (CD) containing all images exposed. SA (b)(6), (b)(7)(C) this office, obtained the fingerprints of Detainee MUSTAF. A copy of the CD containing all images was obtained. (See, Fingerprints, and CD for details.)

Agent's Comment: The official results of the autopsy will be documented in the Final Autopsy Report, which will be provided upon completion. ////////////////////////////////////LAST ENTRY////////////////////////////////////

TYPED AGENT'S NAME AND SEQUENCE NUMBER (b)(6), (b)(7)(C), (b)(7)(F)	ORGANIZATION Aberdeen Resident Agency, CID Aberdeen Proving Ground, MD 21005
SIGNATURE (b)(6), (b)(7)(C)	DATE 7 Oct 07
	EXHIBIT 7

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(REMOVE, REVERSE AND RE-INSERT CARBONS BEFORE COMPLETING THIS SIDE)

DISPOSITION OF REMAINS			
NAME OF MORTICIAN PREPARING REMAINS	GRADE	LICENSE NUMBER AND STATE	OTHER
INSTALLATION OR ADDRESS (b)(6)	DATE	SIGNATURE	
NAME OF CEMETERY OR CREMATORY	LOCATION OF CEMETERY OR CREMATORY		
TYPE OF DISPOSITION		DATE OF DISPOSITION	
REGISTRATION OF VITAL STATISTICS			
REGISTRY (Town and Country)	DATE REGISTERED	FILE NUMBER	
		STATE	OTHER
NAME OF FUNERAL DIRECTOR	ADDRESS		
SIGNATURE OF AUTHORIZED INDIVIDUAL			

DD FORM 2064, APR 1977 (BACK)

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