

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 Abu Ghraib Detention Facility	2. DATE (YYYYMMDD)	3. TIME	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN	7. GRADE/STATUS CIV	
8. ORGANIZATION OR ADDRESS CACI, 504th Military Intelligence Brigade, Abu Ghraib			

9. [REDACTED] WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

I arrived at Abu Ghraib in mid December. I was assigned as a screener. When I first arrived, we were given the briefed on the Interrogation Rules of Engagement (IROE). I did have a general understanding of the Geneva Convention, Military Policy and the CACI policy. I never witnessed or was aware of any detainee abuse at Abu Ghraib. I did see a lot of the detainees come to Abu Ghraib abused. There was a family who was brought in because they were supposedly Fedeyeen. I would always ask about their health problems. If they told us they were beaten, we would take them to the medical facility to get checked. There was one incident of rape with a bottle and a death of a brother. I wrote the report and sent it up higher. This occurred in January at ASAMIYA PALACE. [REDACTED] and Iraqi Police, was causing this. I heard that the Iraqis recently killed him and hung him. I heard this through interpreters but not official channels yet. I do not know who [REDACTED] worked for. One of the individuals who had been abused said he remembers one of the Americans had a flag on his arm. I worked for [REDACTED] for operations, military side, and [REDACTED] during screenings.

Q. Do you have anything else to add to this statement?

A. No

////////////////////////////////////End of Statement////////////////////////////////////

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF <u>2</u> 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 INDICATED

STATEMENT OF [REDACTED] TAKEN AT Abu Ghraib 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 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.

(Signature of Person Making Statement)

WITNESSES:

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

ORGANIZATION OR ADDRESS

(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Typed Name of Person Administering Oath)

UCMJ, ARTICLE 136

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

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