

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: Metro Park Springfield, VA
2. DATE (YYYYMMDD): 2004-01-22
3. TIME: 12:00
4. FILE NUMBER:
5. LAST NAME, FIRST NAME, MIDDLE NAME: [REDACTED]
6. SSN: [REDACTED]
7. GRADE/STATUS: E8

8. ORGANIZATION OR ADDRESS: Det 1, B Co, 141 MI Bn, 300 MI Bde, Utah National Guard, St George, UT 84790

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

I was assigned to Abu Ghraib (AG) from 12 November 2003 until the end of January 2004. For the first few weeks my duty assignment was the 1SG of the HHC as a fillin for the 1SG who was on leave. I was then assigned to my permanent duty as the 1SG and NCOIC of the Joint Interrogation and Debriefing Center. In that capacity I observed interrogations, developed supplementary training for the interrogators and oversaw operational support for aspects of the interrogations. I observed and/or sat in on JIDC interrogations at least three times a day. I did observe an occasional interrogation conducted by OGA personnel. I did not observe, know about or hear of any abuse or humiliation of detainees at AG. I did not see or hear about any unauthorized photos or videos of detainees. My Soldiers did not report any instances of the above to me.

Q: Is there anything else you would like to add? A: No.
End of Statement

Nothing Follows

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

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.

DA FORM 2823, DEC 1998

DA FORM 2823, JUL 72, IS OBSOLETE

USAPA V1.00

STATEMENT OF [REDACTED]

TAKEN AT Springfield, VA

DATED 2004/05/24

9. STATEMENT (Continued)

Nothing Follows

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 185. 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 24 day of May 2004. 2004

ORGANIZATION OR ADDRESS

[REDACTED]
(Signature of Person Administering Oath)

[REDACTED]
(Typed Name of Person Administering Oath)

UCMJ, ARTICLE 136

(Authority To Administer Oaths)

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT [REDACTED]

PAGE 2 OF 2 PAGES

USAPA V1.00