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		_	SWORN STA		~~			
		For use of shi	is form, see AR 190-45; ti	•••••	y la QOCSOPS		1	
	AUTHORITY:	Title 10 USC Section 34	PRIVACY ACT ST 01; Title 5 USC Section 2:		ed November 2	2, 1943 <i>(</i> \$5NJ.		
	PRINCIPAL PURPOSE:	To provide commenders	and law antorcement off	iciels with means by	r which informa	tion may be assurat	ally .	
	ROUTINE USES: DISCLOSURE:		nber is used as an addition I security number is volum		of identification	te facilitate filing a	nd retrieval.	
	1. LOCATION Fort Carson, Colorad		2. DATE /Y		TIME	4. FILE NUMBER		•
	S. LAST NAME, FIRST	-	5. 5	· - · · · · · · · · · · · · · · · · · ·		7. GRADE/STAT	us	_
	8. ORGANIZATION OR	A000008						BL
•			Participant Participant	iost Carson, Colo	nado <b>80</b> 913			53
	8.						<b>.</b>	
			• · · · · ·			TEMENT UNDER OA		
	had a separate team h	nor scout 4 months from the	on February until the en	was located adjac	work tel	increased by	Distance of the second	
NA	I was in the CISOTE-AP for the p	erformance and occurs				at Was used gener	ally by the	07
161								R
								00
. 16)			entish Security Force of	nd an infenter att	d initially fr	the 10th Mount	tais Division	~
1,46)	and then the 1st Infantry Division. Our interpreters included an American named and two Kurdish iragis named in the provident of the provident of the second							BZ
	with dark hair, sometimes he had a mustache and or a beard and a fair, almost Cancesian, complexion. The said his mid to lase 40s and a dark complexion and some facial hair.							
	The Kurdish Guards were used to only secure the outer door of the holding ares. The holding cells were monitored by cameras as							
	well. The interpreters and others who were not authorized to interrogate the detainees did not have access to the detainees. While dealered to from you detained and interpreted leasts. The interpretions over conformed either on the terter leaster or in							
	While deployed to Iraq, we detained and interrogated Iraqia. The interrogations were performed either on the target location or in the team house. We acidean conducted interrogations at FOB Danger. We would capture the detainee, do the initial interrogation							· ·
	on the target sits, then return to the second state of the second							<b>B</b> C
	team house being inte		Nouse. At any given tim	e, we did not hav	B Inole (Into al	ioet a 10 10 octaine		•
	Our interrogation room was a plain room with 10 to 15 foot high coilings, a small box that was used as a table or desk, one or two							
	chairs, it was well lit and then there was only a single door for entry and exit. The holding facility was separate from the other areas by a small open-air walkway.							
	When a detainee was brought into the team house, we did an initial interview with medical screening, photograph, and spot							
	intelligence report. This detainee file would include the data of retention and of release or transfer. The detaines file would be kept with the detainee when they were transported out of the detention facility and would remain with the detainee through the							
	estire detention time. There may have been some form of backup or copy file that was maintained in the team house.							
	I recall detaining		the was a fodsycen o	will leader that we	spent close to himself and l	60 days building a	a case on and out 20	
	conducted operations we have a set of the se							RS
	team house during our deployment to MEq. I only did immediate tactical interrogations to the objective deployment would have plenty of reasons to make false allegations because he is an enemy comparison fighting, what he believes the averagainst American							
	Parces, as such he would do whatever he could to weaken U.S. efforts or suck an advantage. I would question his basic creditability based my knowledge of him, his emotional state and his psychological state. I do not believe him							
	······			ful an all an				
	10. EXHIBIT		11. INITIALS OF	PERSON MAKING	STATEMENT	Ι.		0
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<b>F</b>	ADDITIONAL PAGES MUSY 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							
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ACLU-RDI 2598 p.1

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



ACLU-RDI 2598 p.2



DOD JUNE

ACLU-RDI 2598 p.3