

SWORN STATEMENT

For use of this form, see AR 100-45; the proponent agency is ODCSOFT

PRIVACY ACT STATEMENT

PRIVACY: This is USC Section 201; Title 5 USC Section 2061; E.O. 9307 dated November 22, 1943 ASMR.
PRIVACY PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
PRIVACY USE: 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: Hiesgen Germany 2. DATE: 2004 10 12 3. TIME: 17:30 4. FILE NUMBER:
 5. LAST NAME, FIRST NAME, MIDDLE NAME: [REDACTED] 6. SSN: [REDACTED] 7. GRADE/STATUS: [REDACTED]
 8. ORGANIZATION OR AGENCY: HMB 2-3 FA

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

My name is [REDACTED] and I was assigned as a detainee guard at the 2/3 FA detention facility in [REDACTED] during the December 2003 timeframe in Iraq.

I do remember a family of detainees [REDACTED] that consisted of two sisters and three brothers. Whenever I had guard, they were on the bus. I checked on them every half hour to see if they needed food or water or if they needed to use the latrine. While they were in the detainee cell, I'd check on them every 45 minutes to an hour. I don't recall anything unusual about the [REDACTED] family.

I am aware of the detainee [REDACTED] that died shortly after he left the [REDACTED]. Whenever I was on guard, he was mostly sleeping and I'd occasionally shake him to make sure he was still alive. He was wet from pissing on himself. He never appeared to be beat up or physically abused. He acted if he was drunk or drugged. There was no indication that any of his brothers appeared to be beat up, physically abused, or sodomized. I'm sure I would of heard something if someone got sodomized, and I haven't heard anything about a sodomy.

A lot of the times the detainees had it better than we had it. There was no indication of any physical abuse with detainees. Interpreters were not allowed into the detainee cell without somebody watching them.

Detainees never returned from an interrogation in different shape than from when they left. I saw no evidence of abuse on detainees while in detention or from an interrogation. There was no indication that any interpreters or local nationals had unaccompanied access to detainees. There was no indication that [REDACTED] physically abused any detainees.

End of statement

10. EXHIBIT

N/A

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 0 PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF"

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.

FORM 2023, DEC 1968

DA FORM 2023, JUL 72, IS OBSOLETE

UNCLASSIFIED

SECRET

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Exemptions: **86**

STATEMENT OF

TAKEN AT

13:30

DATE

2004 10 12

86

STATEMENT (Continued)

NOT USED

AFFIDANT

I HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 1. 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 **12** day of **October**, **2004** at **Giesseu Germany**

ORGANIZATION OR ADDRESS

(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Signature of Person Administering Oath)

INITIALS OF PERSON MAKING STATEMENT

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