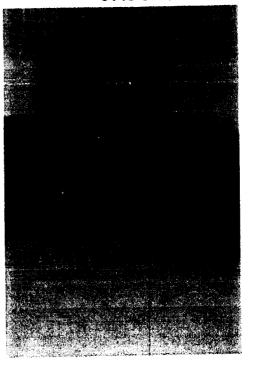


DSCN7191

FOR OFFICIAL USE ONLY

Exhibit: 4

**01340**Jubiu2



DSCN7192

FOR OFFICIAL USE ONLY

Exhibit: \_\_4

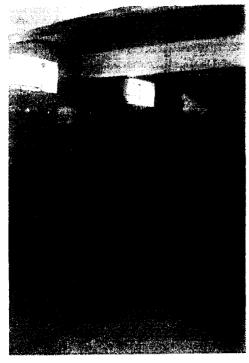


DSCN7193 FOR OFFICIAL USE ONLY Exhibit: 4



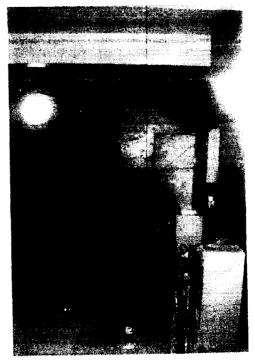
FUR OFFICIAL USE ONLY

DSCN7194 Exhibit: \_\_**4**\_\_\_



**DSCN7195** 

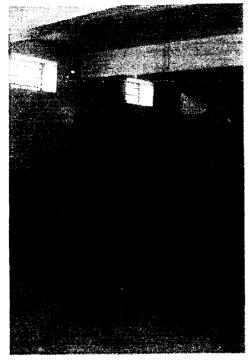
DSCN7197 FOR OFFICIAL USE ONLY Exhibit: 4



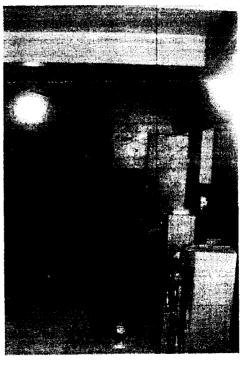
DSCN7196

DSCN7197 FOR OFFICIAL USE ONLY Exhibit: 4

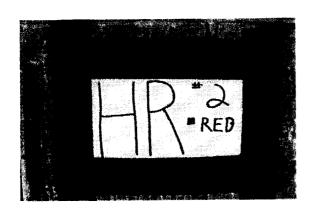
Judio 26 01345



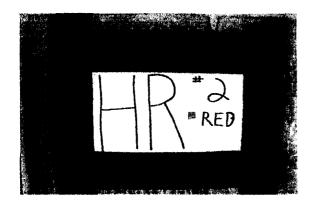
DSCN7195



DSCN7196

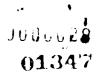


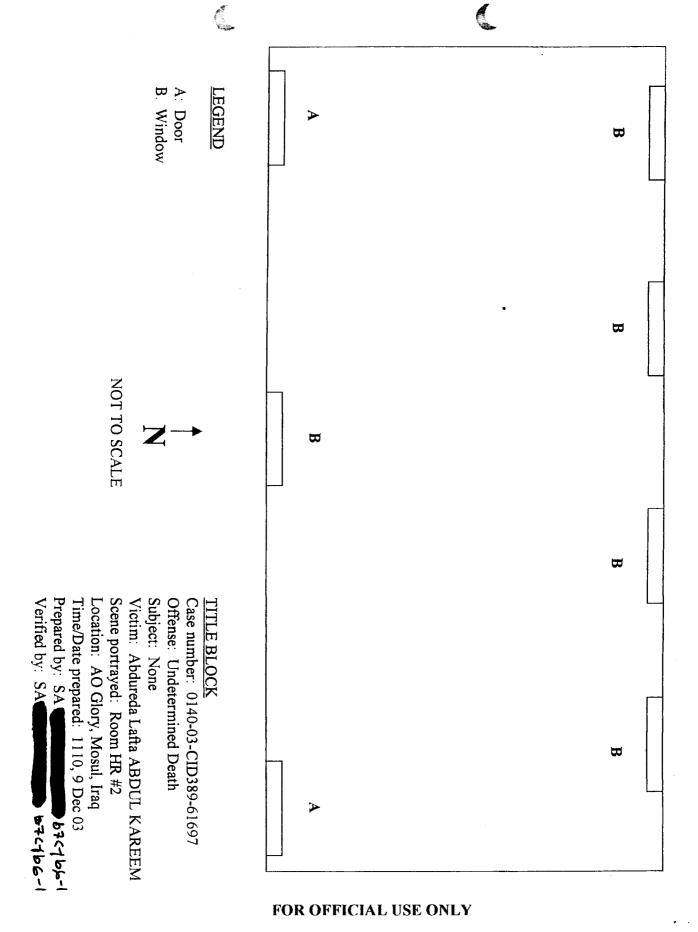
**DSCN7197** FOR OFFICIAL USE ONLY Exhibit: 4



DSCN7197 FOR OFFICIAL USE ONLY

Exhibit: 4





J⊌∂∟529 **0134**8

INCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified. Until the Unit of the Control of the Con	THORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSM).  NOIPAL PURPOSE: To provide commanders and law inforcement officials with means by which information may be accurately identified. Vorus social security number is used as an additional distensate means of identification to facilitate filing and retrieval. Disclosure of your social security number is voluntary.  LOCATION good bodding area, AO glory  2. DATE (TYYMMODIAL ALVES)  LOCATION good bodding area, AO glory  2. DATE (TYYMMODIAL ALVES)  LOCATION GOOD STATEMENT UNDER CAME  2. SSN			OWODAL	CTATEA	CAIT			1
THORITY: Title 10 USC Section 301; Title 5 USC Section 2851; E.O. 9397 dated November 22, 1943 (SSM).  INCIPAL PURPOSE: To provide commanders and law enforcement of incinals with means by which information may be accurately identified.  Your social security number is used as an additional/alterate means of identification to facilitate filming and retrieval  SICOSUME: Discourse of your social security number is used as an additional/alterate means of identification to facilitate filming and retrieval  SICOSUME: Discourse of your social security number is voluntary.  DISCOURT OF YOUR STATEMENT OF THE PROPERTY OF THE	THORITY: Title 10 USC Section 301; Title 5 USC Section 295; E.O. 9397 dated November 22, 1943 (SSM).  NOLIPAL PURPOSE: To provide commandars and law enforcement officials with means by which information may be accurately identified.  VIDING USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.  ELOCATION gade holding area, AO glory  LOCATION gade holding area, AO glory  LAST NAME, FIRST NAME, MIDDLE NAME  ORGANIZATION OR ADDRESS  CO. 325 FSB 10 DITS Airborne Division  E4C-4   CG-4		English of this form				s ODCSOPS		ł
THORITY: Title 10 USC Section 301; Title 5 USC Section 2851; E.O. 9397 dated November 22, 1943 (SSM).  INCIPAL PURPOSE: To provide commandare and law enforcement of triciles with means by which information may be accurately identified. Your social security number is used as an additional/elemate means of identification to facilitate filing and retrieval. Disclosure of your social security number is voluntary to the provide of the provide	THE 10 USC Section 301; Title 5 USC Section 2851; E.O. 9397 dated November 22, 1943 (SSM).  MOPAL PURPOSE: To provide commanders and law enforcement of fricials with means by which information may be accurately identified. Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval. Disclosure of your social security number is voluntary.  Disclosure of your social security number is voluntary.  Disclosure of your social security number is voluntary.  DISCLOSURE: DISCL		roruse of this form						4
INCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified. Your social security number is used as an additional/attenant enans of identification to facilitate and eretrival. Sci. COS. 1987. Disclosure of your social security number is voluntary.  Disclosure of your social security number is voluntary.  Disclosure of your social security number is voluntary.  2. DATE 0/31/2009 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1 - 1030 1	MICHAL PURPOSE: To provide commandars and law enforcement officials with means by which information may be accurately identified. Your social security number is evoluntary.  Disclosure: Disclosure of your social security number is voluntary.  Disclosure of your social security number is voluntary.  DISCLOSURE: Disclosure of your social security number is voluntary.  DISCLOSURE: Disclosure of your social security number is voluntary.  DISCLOSURE: Disclosure of your social security number is voluntary.  DISCLOSURE: DISCLOSURE: DISCLOSURE DISCLOSU						November 22	1943 /SSNI	1
NUMBLUSES:  Vour social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.  SIGOSUME.  Disclosure of your social security number is used as a madditional/alternate means of identification to facilitate filing and retrieval.  SIGOSTON  10CATION  13CATION  1	UTINE USSS:  Vour social security number is used as an additional distinction to facilitate fling and retrieval (CIOSUME)  Disclosure of your social security number is used as a madditional distinction of the control	JTHORITY:	Title 10 USC Section 301; Int	ie 5 USC Secti	on 2951; ( et officiale	with means by w	which informat	ion may be accurately identified.	
INCORTION  INCORTION  INCORDING	Disclosure of your social security number is voluntary.  LOCATION gade bolding area, AO glory  LAST NAME, FIRST NAME, MIDDLE NAME  STATE AND STATEMENT UNDER STATUS  ORGANIZATION OR ADDRESS  CO. 326 FSR IOITS Alfrown Division  E4-4   16-4    Was called to evaluate a detained this morning at 0830. The detained had was suspected to be deceased and had briefly been may be 11-1    Was called to evaluate a detained this morning at 0830. The detained had was suspected to be deceased and had briefly been may be 11-1    Was called to evaluate a detained this morning at 0830. The detained had was suspected to be deceased and had briefly been may be 11-1    Was called to evaluate a detained this morning at 0830. The detained had was suspected to be deceased and had briefly been may be 11-1    Was called to evaluate a detained this morning at 0830. The detained had was suspected to be deceased and had briefly been may be 11-1    Was called to evaluate a detained this morning at 0830. The detained had was suspected to be deceased and had briefly been may be 11-1    Was called to evaluate a detained his morning at 0830. The detained had was suspected to be deceased and had briefly been may be provided to the patient during any of her previous side, call visits to the detained the notified mayer. She noted his lack of pulse, dusky and cool skin, unresponsive to light. No cardiac active was greated any of her previous side, call visits to the noted as the day of the patient during any of her previous side, call visits to the side day of the major of the patient during any of her previous side, call visits to the noted as the day of the patient during any of her previous side, call visits to the new of the side of the patient during the new and the notified at full call and noted the following. He had not be night to the patient during the p		To provide commanders and is	used as an ad	iditional/alt	ernate means of	identification	to facilitate filing and retrieval.	1
LOCATION   2. DATE / PYPYMANDING-1/LUSE   1. DATE   1.	Location gade holding area, AO glory   2.0 ATE (PYYYMMODIC-4)   2.0 ATE (PYYMMODIC-4)   2.0 ATE (PYYMODIC-4)   2.0 ATE (PYYM						•		_
igade holding area, AO glory  LAST NAME, FIRST NAME, MDDLE NAME  LAST NAME, FIRST NAME, MDDLE NAME, MDDLE NAME, AND STATEMENT UNDER CASH  LAST NAME, FIRST NAME, MDDLE NAME, MDDLE NAME, AND STATEMENT UNDER CASH  LAST NAME, FIRST NAME, MDDLE NAME, MDDLE NAME, AND STATEMENT UNDER CASH  LAST NAME, FIRST NAME, MDDLE NAME, MDDLE NAME, AND STATEMENT UNDER CASH  LAST NAME, FIRST NAME, MDDLE NAME, MDDLE NAME, AND STATEMENT UNDER CASH  LAST NAME, FIRST NAME, MDDLE NAME, M	page holding area, AO glory  LAST NAME, FIRST NAME MODIE NAME  S. SSN 64.5.4.6.6.4.7. 17. GRADE/STATUS  ORGANIZATION OR ADDRESS  Co. 326 FSB 101rs Airborne Division  E4.6.4.1.6.6.4.7. WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:  was called to evaluate a detainee this morning at 0830. The detainee had was suspected to be deceased and had briefly been on by 1.1.7. So the patient during any of the previous sick-call visits the holding area. I went to the holding area and evaluated the patient. He was, as previously noted by 11.7. Cool, sky, unresponsive. Pupils were fixed and unresponsive to light. No cardiac activy was present. I determined at that time he is deceased. The patient was not familiar to me.  At this time I did a full exam and noted the following findings. Several ulcers were noted. A 2x3 cm ulceration at the right is, radial side. Grade II without surrouding crythema, yellowish base. A slight indentation from previously present werst flex its remained which did not touch the ulcer but went around it. A 2x2 cm ulcer was seen on the left wrist, radial side. Grade II without surrouding erythema, yellowish base. A slight indentation from previously present werst flex remained which did not touch the ulcer but went around it. A 2x2 cm ulcer was seen on the left wrist, radial side. Seen and over the fifth mutp join. Seen to place the right briefs under some of the superior seen to place and over the fifth mutp join. Seen to place the right briefs must be region which has several smaller <  x  1x  1x  1x  1x  1x  1x  1x  1x  1x		Disclosure of your social seem	2. DAT	TE (YYYYM	MDD byc 4 be-	ME 12.07	4 FII E NUMBER	7
ORGANIZATION OR ADDRESS CO. 526 FSB 101rst Airborne Division  BAC-4   16-4    Was called to evaluate a detainee this morning at 0830. The detainee had was suspected to be deceased and had briefly been en by 11.1    Was called to evaluate a detainee this morning at 0830. The detainee had was suspected to be deceased and had briefly been en by 11.1    Was called to evaluate a detainee this morning at 0830. The detainee had was suspected to be deceased and had briefly been en by 11.1    Was called to evaluate the notified myself. She also noted having never seen the patient during any of her previous sick-call visits he holding area. In the notified great had not the holding area and evaluated the patient. He was, as previously noted by 11.1    Was deceased. The patient was not familiar to me. She there is the patient was not familiar to me. She deceased the patient was not familiar to me. She deceased the patient was not familiar to me. She deceased the patient was not familiar to me. She deceased the patient was not familiar to me. She deceased the patient was not familiar to me. She deceased the patient was not familiar to me. She the value of the patient was not familiar to me. She deceased the patient was not familiar to me. She deceased the she was not familiar to me. She deceased the she was not familiar to me. She the value of the same description as the right wrist ulcer. Grade I ulcers were extensive the extensor surface. The left wrist ulcer was otherwise of the same description as the right wrist ulcer. Grade I ulcers were extensive the extensor surface. The left wrist ulcer was otherwise of the same description as the right wrist ulcer. Grade I ulcers were extensive the extensor surface. The left wrist ulcer was otherwise of the same description as the right wrist ulcer. Grade I ulcers were extensive the medial side of the right bicseps muscle. This was 1.5 % of some and sent the replace of the same several smaller <  x  cm ecceptain the same several smaller <  x  cm ecceptain the same several smaller	ORGANIZATION OR ADDRESS Co. 526 FSB 101rs Airborne Division  E444 1644	rigade holding area,			2003/12/0	)9	1030	1	$\frac{1}{2}$
was called to evaluate a detainee this morning at 0830. The detainee had was suspected to be deceased and had briefly been en by ILT physicians assistant at charlic company. She noted his lack of pulse, dusky and cool skin, unresponsiveness of direct pulse and then notified myself. She also noted having never seen the patient during any of her previous sick-call visits the holding area. I went to the holding area and evaluated the patient. He was, as previously noted by ILT cool, at the patient was not familiar to me.  At this time I did a full exam and noted the following findings. Several ulcers were noted. A 2x3 cm ulceration at the right at this time I did a full exam and noted the following findings. Several ulcers were noted. A 2x3 cm ulceration at the right rist, radial side. Grade II without surrouding crythema, yellowish base. A slight indentation from previously present wrist flex fits remained which did not touch the ulcer but went around it. A 2x2 cm ulcer was seen on the left wrist, radial side but mostly the extensor surface. The left wrist ulcer was othewise of the same description as the right wrist ulcer. Grade I ulcer were seen to be a surface. The left wrist ulcer was othewise of the same description as the right wrist ulcer. Grade I ulcer were sent on the lateral lateral malleoli of the ankles and over the fifth map joint. A < 1 cm alteration was noted on the surface and the surface of the right blocks and over the fifth map joint. A < 1 cm alternation was noted on the surface and the surface and the surface of the right blocks and over the fifth map joint. A < 1 cm alternation was noted on the surface and the surface. The left with minimal blood matted in the hair. A hematoma was palpable of approximately 3x3 cm in size. A fluid filled balle as present on the medial side of the right blocks made of the ri	was called to evaluate a detainee this morning at 0830. The detainee had was suspected to be deceased and had briefly been and by ILT. The physicians assistant at charlie company. She noted his lack of pulse, dusky and cool skin, unresponsiveness of fixed pupils and then notified myself. She also noted having never seen the patient during any of her previous sick-call visits the holding area. I went to the holding area and evaluated the patient. He was, as previously noted by ILT. cool, at the patient was not familiar to me.  At this time I did a full exam and noted the following findings. Several ulcers were noted. A 2x3 cm ulceration at the right is, radial side. Grade II without surrouding crythema, yellowish base. A slight indentation from previously present wrist flex firs remained which did not touch the ulcer but went around it. A 2x2 cm ulcer was seen on the left wrist ulcer. Grade I lucers were sent on bilateral lateral mallelool in the ankles and over the fifth mup joint. A <   cm laceration was noted on the surfering sent on bilateral lateral mallelool in the ankles and over the fifth mup joint. A <   cm laceration was noted on the surfering the present on the left with the medial side of the right biceps muscle. This was 15x0.5 cm and somewhat linear. The programma has a 4 cm region which has several smaller < 1x1 cm eachymoses within it. The limbs were easily mobile and not right. All seaurements were estimated.  By a cool of the right present and learned that following. He had been here for four days. his initial interview on mission did not reveal any medical problems or medications he had been taking. He had not been noted to have previously \$2x4 in \$100 to		676-4,66-4		U. UUI	V+C-410			4
was called to evaluate a detainee this morning at 0830. The detainee had was suspected to be decaesed and had briefly been en by 1.1. The physicians assistant at charlic company. She noted his lack of pulse, dusky and cool skin, unresponsiveness of fisch pulse and then notified myself. She also noted having never seen the patient during any of her previous sick-call visits the holding area. I went to the holding area and evaluated the patient. He was, as previously noted by 1.1. The patient was not familiar to me.  At this time I did a full exam and noted the following findings. Several ulcers were noted. A 23 cm ulceration at the right at this time I did a full exam and noted the tollowing findings. Several ulcers were noted. A 23 cm ulceration at the right rist, radial side. Grade II without surrouding crythema, yellowish base. A slight indentation from previously present wrist flex fish remained which did not touch the ulcer to us were noted. A 23 cm ulceration at the right with the extensor surface. The left wrist ulcer was othewise of the same description as the right wrist tulor. Grade I ulcers were seen on blateral lateral malleol of the ankles and over the fifth into point as the right wrist tulor. The latest was otherwise of the same description as the right wrist tulor. A 12 cm ulcer was seen on the medial side of the right bless and over the fifth into point and the right wrist tulor. The latest was otherwise of the same description as the right wrist tulor. The latest was otherwise and the right wrist tulor as present on the medial side of the right bless and over the fifth into point and the right wrist tulor. A late and the right wrist tulor was a place of the right bless and over the fifth into point and the right wrist tulor was a place of the right bless and over the fifth into point and the right wrist tulor was a place of the right bless and over the right wrist tulor was a place of the right bless and the right was a place of the right bless and the right was a place of the right bless and t	was called to evaluate a detainee this morning at 0830. The detainee had was suspected to be deceased and had briefly been my 11.17 and physicians assistant at charlic company. She noted his lack of pulse, dusky and cool skin, unresponsiveness of fixed pupils and then notified myself. She also noted having never seen the patient during any of her previous sick-call visits the holding area. I went to the holding area and evaluated the patient. He was, as previously noted by 11.17 and 11.18 time he is deceased. The patient was not familiar to me.  At this time I did a full exam and noted the following findings. Several ulcers were noted. A 2x3 cm ulceration at the right is, radial side. Grade II without surrouding crythema, yellowish base. A slight indentation from previously present wrist flex fis remained which did not touch the ulcer but went around it. A 2x2 cm ulcer was seen on the left with readily the extensor surface. The left wrist ulcer was othewise of the same description as the right wrist ulcer. Grade I ulcers were sent on the left which are the region with minimal blood matted in the hair. A hematoma was palpable of approximately 3x3 cm in size. A fluid filled bulke as present on the medial side of the right biceps muscle. This was 1.5x0.5 cm and somewhat linear. The rightstrian area has a 4 cm region which has several smaller < 1x1 cm ecchymoses within it. The limbs were easily mobile and not rigid. All exaurements were estimated.  I will be presented the personnel present and learned that following. He had been here for four days. his initial interview on briefly interviewed the personnel present and learned that following. He had been here for four days. his initial interview on briefly interviewed the personnel present and learned that following. He had been here for four days. his initial interview on briefly interviewed the personnel present and learned that following the had been here for four days. Here are the personnel present and the personnel present and the personnel present and the pe	. Co. 526 FSB 101r	st Airborne Division						4
was called to evaluate a detainee this morning at 0830. The detainee had was suspected to be deceased and had briefly been en by 1LT	was called to evaluate a detainee this morning at 0830. The detainee had was suspected to be deceased and had briefly been in by 1LT physicians assistant at charlie company. She noted his lack of pulse, dusky and cool skin, unresponsiveness if fixed pupils and then notified myself. She also noted having never seen the patient during any of her previous sick-call visits the holding area. I went to the holding area and evaluated the patient. He was, as previously noted by 1LT cool, sky, unresponsive. Pupils were fixed and unresponsive to light. No cardiac activy was present. I determined at that time he is deceased. The patient was not familiar to me. At this time I did a full exam and noted the following findings. Several ulcers were noted. A 2x3 cam ulceration at the right its; radial side by the extensor surface. The left wrist ulcer was othewise of the same description as the right visit ulcer. Grade I ulcers were esent on bilateral lateral malleoil of the ankles and over the fifth mtp joint. A < [cm] and any any and a surface is a company of the ankles and over the fifth mtp joint. A < [cm] and any	676-4,00	-4	,	MANT TO	MAKE THE EOU	OWING STAT	EMENT LINDER OATH:	
on by ILT aphysicians assistant at charite company. She noted mis tack of pute, casky and characteristic difference of difference of the previous stell-call visits the holding area. I went to the holding area and evaluated the patient. He was, as previously noted by ILT according to the holding area and evaluated the patient. He was, as previously noted by ILT according to the holding area and evaluated the patient. He was, as previously noted by ILT according to the holding area and evaluated the patient. He was, as previously noted by ILT according to the holding area and evaluated the patient. He was, as previously noted by ILT according to the holding area and evaluated the patient. He was, as previously noted by ILT according to the sast decased. The patient was not familiar to me. At this time I did a full exam and noted the following findings. Several ulcers were noted. A 2x3 cm ulceration at the right rist, radial side but mostly the extensor surface. The left wrist ulcer was othewise of the same description as the right wrist, radial side but mostly the extensor surface. The left wrist ulcer was othewise of the same description as the right wrist, radial side but mostly the extensor surface. The left wrist ulcer was othewise of the same description as the right wrist ulcer. Grade I ulcers were estimated as present on the medial about matted in the hair. A hematoma was palpable of approximately 3x3 cm in size. A fluid filled bullae as present on the medial about matted in the hair. A hematoma was palpable of approximately 3x3 cm in size. A fluid filled bullae as present on the medial about matted in the hair. A hematoma was palpable of approximately 3x3 cm in size. A fluid filled bullae as present on the medial about matted and the province of the prov	in by ILT physicians assistant at charite company. See noted this tack of pute, casky and two stack call visits the holding area. I went to the holding area and evaluated the patient. He was, as previously noted by ILT cool, sky, unresponsive. Pupils were fixed and unresponsive to light. No cardiac activy was present. I determined at that time he is deceased. The patient was not familiar to me.  It is deceased. The patient was not familiar to me.  It is this time I did a full exam and noted the following findings. Several ulcers were noted. A 2x3 cm ulceration at the right ist, radial side. Grade II without surrouding crythema, yellowish base. A slight indentation from previously present wrist flex iffs remained which did not touch the ulcer but went around it. A 2x2 cm ulcer was seen on the left wrist, radial side but mostly fis remained which did not touch the ulcer but went around it. A 2x2 cm ulcer was seen on the left wrist, radial side but mostly fis remained which did not touch the ulcer but went around it. A 2x2 cm ulcer was seen on the left wrist, radial side but mostly into extensor surface. The left wrist ulcer was othewise of the same description as the right wrist ulcer. Grade I ulcers were time extensor surface. The left wrist ulcer was othewise of the same description as the right wrist ulcer. Grade I ulcers were cash to the medial side of the right biceps muscle. This was 1.5x0.5 cm and somewhat linear. The epigastric area has a sorpresent on the medial side of the right biceps muscle. This was 1.5x0.5 cm and somewhat linear. The epigastric area has a particular with the previous were estimated. The medial side of the right biceps muscle. This was 1.5x0.5 cm and somewhat linear. The epigastric area has a particular was a superior continuation of the previous was a detained who might need medical attention of the previous was a detained who might need medical attention of the previous was a detained who might need to have previously be a particular was a detained who might have been some previous				MANTIO	WIAKE THE FOLL	OWING STAT	LINEIVY ONDER STATE	1
ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT TAKEN AT DATED	ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT TAKEN AT DATED	At this time I did a vrist, radial side. Gruffs remained which on the extensor surfactoresent on bilateral lacciput with minimal was present on the mix4 cm region which neasurements were end briefly interviewed mission did not react the complained of any under the complained of any	atient was not familiar to me full exam and noted the followate II without surrouding ended not touch the ulcer but were. The left wrist ulcer was atteral malleoli of the ankles a blood matted in the hair. A dedial side of the right biceps has several smaller < 1x1 constraints and large any medical problems or musual symptoms. He had not have any type as wounds you thing to add to this statement.	wing finding ythema, yellowent around is othewise of the indications of the indication of the i	s. Severa bwish base it. A 2x2 he same do iifth mtp j was palpah s was 1.5 s within i ollowing. he had by	al ulcers were note. A slight indice of ulcer was seescription as the oint. A < 1 cm and so the oint of approximation and so the oint of approximation. The limbs were taking. He wiously as a determined of the oint oint oint oint oint oint oint oint	entation from seen on the lease right wrist on laceration vately 3x3 cm when the lines were easily make the for four charles the land had not been	cm ulceration at the right in previously present wrist flex eft wrist, radial side but mostly ulcer. Grade I ulcers were was noted on the superior in size. A fluid filled bullate ar. The epigastric area has a obile and not rigid. All days. his initial interview on a noted to have previously best	
ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT TAKEN AT DATED	DDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT TAKEN AT DATED	10. EXHIBIT		11. INITI	ALS OF PE			PAGE 1 OF PAGES	
ADDITIONAL PAGES MOST CONTAIN THE HEADING STATEMENT	DDITIONAL PAGES MOST CONTAIN THE READING STATEMENT	ADDITIONAL DACES	MUST CONTAIN THE HEADING	"STATEMEN"	, 0	TAKEN AT	DATED		1
	THE INITIAL PROPERTY AND PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBERY								J
WOT DE DE INDICATED		MUST BE BE INDICAT	EU.	$\Delta$		A		USAPA VI.	300

ACLU-RDI 142 p.10

**USE ONLY** 

EXHIBIT, 6

		TAKEN AT	DATED	
STATEMENT	(Continued)	,		
		·		
	·	*		
	634-4,66-4			
	_67c-4,66-4	AFFIDAVIT		
I,	IS ON PAGE IVAND ENDS O	, HAVE READ OF	R HAVE HAD READ TO ME THIS STATEMENT IE CONTENTS OF THE ENTIRE STATEMENT MAI	
HICH BEGIN	IS ON PAGE TO AND ENDS O	, HAVE READ OF PAGE 2. I FULLY UNDERSTAND THE INITIALED ALL CORRECTIONS AND HA	IE CONTENTS OF THE ENTIRE STATEMENT MAI VE INITIALED THE BOTTOM OF EACH PAGE	DE
HICH BEGIN Y ME. THE	IS ON PAGE 17 AND ENDS OF	N PAGE, HAVE READ OF PAGE, HAVE READ OF PAGE I FULLY UNDERSTAND THE INITIALED ALL CORRECTIONS AND HAWADE THIS STATEMENT, FREELY WITHOUT	IE CONTENTS OF THE ENTIRE STATEMENT MAI VE INITIALED THE BOTTOM OF EACH PAGE T HOPE OF BENEFIT OR REWARD, WITHOUT	
HICH BEGIN Y ME. THE	IS ON PAGE 17 AND ENDS OF		IE CONTENTS OF THE ENTIRE STATEMENT MAI VE INITIALED THE BOTTOM OF EACH PAGE THOPE OF BENEFIT OR REWARD, WITHOUT UNLAWFUL INDUCEMENT.	DE
HICH BEGIN Y ME. THE	IS ON PAGE 17 AND ENDS OF		IE CONTENTS OF THE ENTIRE STATEMENT MAINE INITIALED THE BOTTOM OF EACH PAGE THOPE OF BENEFIT OR REWARD, WITHOUT UNLAWFUL INDUCEMENT.	DE
VHICH BEGIN Y ME. THE ! ONTAINING HREAT OF P	IS ON PAGE 17 AND ENDS OF		IE CONTENTS OF THE ENTIRE STATEMENT MAINE INITIALED THE BOTTOM OF EACH PAGE THOPE OF BENEFIT OR REWARD, WITHOUT UNLAWFUL INDUCEMENT.	
/HICH BEGIN Y ME. THE ! ONTAINING HREAT OF P	IS ON PAGE 17 AND ENDS OF	, HAVE READ OF THE INTERIOR OF	THE CONTENTS OF THE ENTIRE STATEMENT MAIN VE INITIALED THE BOTTOM OF EACH PAGE THOPE OF BENEFIT OR REWARD, WITHOUT UNLAWFUL INDUCEMENT.    676-4   66-4     676-4   66-4     6810   6810   6810   6810   6810     6810   6810   6810   6810     6810   6810   6810   6810     6810   6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810	·w
VHICH BEGIN Y ME. THE ! ONTAINING HREAT OF P	IS ON PAGE 17 AND ENDS OF	, HAVE READ OF THE INTERIOR OF	IE CONTENTS OF THE ENTIRE STATEMENT MAINE INITIALED THE BOTTOM OF EACH PAGE THOPE OF BENEFIT OR REWARD, WITHOUT UNLAWFUL INDUCEMENT.    1076-4   106-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   1076-4   107	1w 1
VHICH BEGIN Y ME. THE S CONTAINING HREAT OF P	IS ON PAGE 17 AND ENDS OF	, HAVE READ OF THE INTERIOR OF	IE CONTENTS OF THE ENTIRE STATEMENT MAINE INITIALED THE BOTTOM OF EACH PAGE THOPE OF BENEFIT OR REWARD, WITHOUT UNLAWFUL INDUCEMENT.    10   10   10   10   10   10   10   1	1W 1
VHICH BEGIN Y ME. THE S ONTAINING HREAT OF P VITNESSES:	IS ON PAGE 17 AND ENDS OF		Signature of Person Administering Oath)	1W 1
VHICH BEGIN Y ME. THE S ONTAINING HREAT OF P VITNESSES:	IS ON PAGE 1/ AND ENDS OF STATEMENT IS TRUE. 1 HAV THE STATEMENT. 1 HAVE N UNISHMENT, AND WITHOUT	, HAVE READ OF N PAGE	IE CONTENTS OF THE ENTIRE STATEMENT MAINE INITIALED THE BOTTOM OF EACH PAGE THOPE OF BENEFIT OR REWARD, WITHOUT UNLAWFUL INDUCEMENT.    676-4   66-4     676-4   66-4     6810   6810   6810   6810   6810     6810   6810   6810   6810     6810   6810   6810   6810     6810   6810   6810   6810     6810   6810   6810     6810   6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810   6810     6810   6810     6810   6810   6810     6810   6810   6810     6810   6810     6810   6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810   6810     6810     6810   6810     6810   6810     6810   6810     6810   6810	1W 1
VHICH BEGIN Y ME. THE S CONTAINING HREAT OF P VITNESSES:	IS ON PAGE 1/ AND ENDS OF STATEMENT IS TRUE. 1 HAV THE STATEMENT. 1 HAVE N UNISHMENT, AND WITHOUT	, HAVE READ OF N PAGE I FULLY UNDERSTAND THE INITIALED ALL CORRECTIONS AND HAWADE THIS STATEMENT, FREELY WITHOUT COERCION, UNLAWFUL INFLUENCE, OR Subscribed at	THE CONTENTS OF THE ENTIRE STATEMENT MAINTENTIALED THE BOTTOM OF EACH PAGE THOPE OF BENEFIT OR REWARD, WITHOUT UNLAWFUL INDUCEMENT.    676-4   66-4     6816mature of Person Making Statement     697-4   66-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4	1W 1
VHICH BEGIN Y ME. THE S CONTAINING HREAT OF P VITNESSES:	IS ON PAGE 1/ AND ENDS OF STATEMENT IS TRUE. I HAVE NOT THE STATEMENT. I HAVE NOT THE STATEMENT, AND WITHOUT AND W	, HAVE READ OF N PAGE I FULLY UNDERSTAND THE INITIALED ALL CORRECTIONS AND HAWADE THIS STATEMENT, FREELY WITHOUT COERCION, UNLAWFUL INFLUENCE, OR Subscribed at	THE CONTENTS OF THE ENTIRE STATEMENT MAINTENTIALED THE BOTTOM OF EACH PAGE THOPE OF BENEFIT OR REWARD, WITHOUT UNLAWFUL INDUCEMENT.    676-4   66-4     685   685   685   685   685   685     685   685   685   685   685   685     685   685   685   685   685     685   685   685   685   685     685   685   685   685     685   685   685     685   685   685     685   685   685     685   685   685     685   685   685     685   685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685     685   685     685   685     685   685     685   685     685     685   685     685   685     685   685     685   685     685     685   685     685   685     685   685     685   685     685     685   685     685   685     685     685   685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685	1W 1
WHICH BEGIN BY ME. THE SECONTAINING THREAT OF P	IS ON PAGE 1/ AND ENDS OF STATEMENT IS TRUE. 1 HAV THE STATEMENT. 1 HAVE N UNISHMENT, AND WITHOUT	, HAVE READ OF N PAGE I FULLY UNDERSTAND THE INITIALED ALL CORRECTIONS AND HAWADE THIS STATEMENT, FREELY WITHOUT COERCION, UNLAWFUL INFLUENCE, OR Subscribed at	THE CONTENTS OF THE ENTIRE STATEMENT MAINTENTIALED THE BOTTOM OF EACH PAGE THOPE OF BENEFIT OR REWARD, WITHOUT UNLAWFUL INDUCEMENT.    676-4   66-4     6816mature of Person Making Statement     697-4   66-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4     697-4   697-4	1W 1
VHICH BEGIN BY ME. THE STONTAINING THREAT OF P  VITNESSES:  ORGANIZATI  ORGANIZATI	IS ON PAGE 1/ AND ENDS OF STATEMENT IS TRUE. I HAVE NOT THE STATEMENT. I HAVE NOT THE STATEMENT, AND WITHOUT AND W	, HAVE READ OF N PAGE 2. I FULLY UNDERSTAND THE INITIALED ALL CORRECTIONS AND HAWADE THIS STATEMENT, FREELY WITHOUT COERCION, UNLAWFUL INFLUENCE, OR Subscribed at AMD STATEMENT AT A AMD STATEMENT AND STATEMENT AT A AMD STATEMENT AT A AMD STATEMENT AND STATEMENT AT A AMD STATEMENT AT A AMD STATEMENT AT A AMD STATEMENT AND STATEMENT AT A AMD STATEMENT AND STATEMENT AND STATEMENT AT A AMD STATEMENT AND STATEMENT AT A AMD STATEMENT AND	THE CONTENTS OF THE ENTIRE STATEMENT MAINTENTIALED THE BOTTOM OF EACH PAGE THOPE OF BENEFIT OR REWARD, WITHOUT UNLAWFUL INDUCEMENT.    676-4   66-4     685   685   685   685   685   685     685   685   685   685   685   685     685   685   685   685   685     685   685   685   685   685     685   685   685   685     685   685   685     685   685   685     685   685   685     685   685   685     685   685   685     685   685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685   685     685     685   685     685   685     685   685     685   685     685     685   685     685   685     685   685     685   685     685     685   685     685   685     685   685     685   685     685     685   685     685   685     685     685   685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685     685	6-1

SWORN STATEMENT For use of this form, see AR 190.45; the proponent agency is ODCSUrv /40-03-C10389-C1697
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.  2. DATE (YYYYMMOOT)  3. TIME  4. FILE NUMBER  2003 12 09  5. LAST NAME FIRST NAME MIDDLE NAME 67-4 (66-4)  6. SSN 974-4, 66-4  7. GRADE/STATUS  8. ORGANIZATION OR ADDRESS 24-4, 66-4
BRATTERY COMPANY 311th MT IRAG MOSUL IRAGY  9. 676-4166-4  WANT TO MAKE THE FOLLOWING STATEMENT UNDER DATH:  On 09 Dec 03 I arrived at the Brigade Holding Area at 04:00. Around  MACH 166-4
Use t into Holding room # Z to wake the sleeping detainers. As I was waking the detainers I came upon one that was still sleeping. I then tapped
his leg to wake him. He did not respond so I removed his sand bag from his head. I then noticed that his eyes we're extremely bloodshot
and that he was still not noving. I then shecked for his pulse by could not find one. I then alerted Sat. to what was
happening. He came with me to check on the detainer. He then followed by calling the medics. When the medic arrived she back-up to confirmed that the detainer was dead. Myself and PFC
removed the detainer and placed him in another room.  676-1  676-4  676-4  676-4
ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF LAKEN AT DATED
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE BE INDICATED.  DA FORM 2823, DEC 1998  DA FORM 2823, JUL 72, IS OBSOLETE

THE PART OF THE PA	
USE THIS PAGE IF NEEDED. IF THIS PAGE IS NOT NEEDED, PLEASE PROCEED TO FINAL PAGE OF THIS FORM.	
TAKEN AT MOSUL 1840 DATED 90EC 03	
12. Normally we wake the detainers around 07:30 to 08:00 ofter we	
tinish eating.	
HOW DO YOU WHICE THE DETAINES UP?	
We wake the detainers by yelling for them to get up in both english	
and arabic. The ones the don't automoticly stand up are showken by either	
hand or foot. When we shake them it is just a top and not a kick.	
2. HOW DID YOU ATTEMPT TO WAKE UP (#58) THIS DETAINED	
4. Africa the initial yelling #58 did not respond so I mudged his leg	
with my foot.	
WHEN # 50 DID NOT RESPOND WHAT WERE HOUR ACTIONS?	
t: I bent down and removed his sand bag. I then noticed that	
his eyes were bloodshot.	
DIWHAT DID YOU DO APTER NOTICING HIS BLOODSHOT EYES?	
A: I then closed his pulse and discovered that he didn't have	
one. I followed by getting Sat. The came to check on	
the detrinee. He then called the medics. The medic came to	
confirm the death of the detrinee - I then followed by moving	
the detainer to another room. PFC assisted we in moving	
the detainer.	J-C-4
Q HOW LONG HAD # 58 BEEN UNDER THE GUARD OF THE BHA	
INITIALS OF PERSON MAKING STATEMENT  64C-4, b6-4  PAGE 2 OF 4 PAGES	]

PAGE 2, DA FORM 2823, DEC 1998

OFFICIAL USE ONLY

EXHIBIT\_7

Jude: 33 01352

140-03-010389-61697

USE THIS PAGE IF NEEDED.		O, PLEASE PROCEED NINAL	PAGE OF 1	THIS FORM.	
STATEMENT OF	TAKEN AT	MOSUL IRAQ 0	ATED	7.0ec.o.	3
66-STATEMENT (Continued)  A: I believe the detaine					
Q: 4AS # 58 ALR					
A. He continuously remov	ed his sand boo	as nearly all the	detai	nees do.	<u>ن و</u>
fixed this problem by	placing his ha	rds behind his	مهوله ١	Ne used	
flexents to restrain 1		•			
D. DID YOU PLACE #	58's HANT	DE BEZIND H	15 B	ACK AD	10
Thex every HIM?			<del></del>		<u></u>
A: I am not sure bec	ause we have	so many detaine	es. It	r's hard	40
remember which ones PRIDE TO 626-4, 66.4	do what on a	deily basis.		0.01	
8. WHON 300 FOUNT			10017C	ED K	<u> </u>
INJURIES ON OR 1	भटिएपर भाड	12009?			
Ai No, I had not noti					
Q' AFTER YOU FOUN	10 4 58 1	DID YOU DIE	اري	4614	
injuries?					
a : When we found him	A I noticed:	vijuries around L	is wi	st from	
the flexcuffs. I a	ssumed they w	ere from him	lying	on his	
hands.					
Q WHEN WAS THE	LAST TIME	E YOU BAW	# 58	ALUE	?
a Around 16:00 on 00	8 Dec 103.			:	107c-4,66-4
Q. WHEN YOU POI		COHAT WAS	415	POSTUR	
INITIALS OF PERSON MAKING STATEMENT	676-4,66-4		PAGE	3 of 4	PAGES  J. Manha viscol 3 4
DAGE 2 DA FORM 2823 DEC 1008	OFF	TRAT		T-17 71	U MEAPA VIVOOU

ACLU-RDI 142 p.14

OFFICIAL **USE ONLY** 

b1c-4, b6-4	TAKEN AT ATED 9 DET 03
MENT OF	TARCH AT
He was lying on his back	underneath of a blanket. His hands
are flexculted to the rear o	and a sand has was placed over
as hard the also was fully	clothed minus shoes.
DO YOU HAVE ANYTHING	S TO AOD TO THIS SIME MENT
At no time did the detainer	request medical attention so no
special care was given to	him. To the best of my knowledge.
'DO YOU HAVE ANYTHING	BAC-4 poor
: No, I do not have complaine	else to add.
	AFFIDAVIT
67C-4166-4	, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT
AND ENDS ON PAGE	, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT  I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE  I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT. I HAVE MADE THIS
AND ENDS ON PAGE	HAVE BEAD OR HAVE HAD READ TO ME THIS STATEMENT
AND ENDS ON PAGE	, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT  I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE  I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT. I HAVE MADE THIS
AND ENDS ON PAGE	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT  I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE  AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS  HREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.    Signature of Plason Making Statement     Subscribed and sworn to before me, a person authorized by law to   administer oaths, this
WHICH BEGINS ON PAGE , AND ENDS ON PAGE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS A STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT T	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT  I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE  AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS  HREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.  (Signature of Plason Making Statement)  Subscribed and sworn to before me, a person authorized by law to
WHICH BEGINS ON PAGE , AND ENDS ON PAGE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS A STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT T	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT  I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE  AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS  THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.    Signature of Pisson Making Statement     Subscribed and sworn to before me, a person authorized by law to   administer oaths, this   Old   Old   Old     Add   Old   Old     Add   Old   Old     Add   Old   Old     Add     Add   Old     Add   Old     Add     Add   Old     Add     Add   Old     Add     Add
WHICH BEGINS ON PAGE , AND ENDS ON PAGE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS A STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT T	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT  I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE  AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS  HREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.    Signature of Plason Making Statement
WHICH BEGINS ON PAGE , AND ENDS ON PAGE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS A STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT T  WITNESSES:  ORGANIZATION OR ADDRESS	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT  I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE  AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS HREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.    Signature of Pason Making Statement
WHICH BEGINS ON PAGE , AND ENDS ON PAGE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS A STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT T	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT  I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE  AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS  HREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.    Signature of Pisson Making Statement     Subscribed and sworn to before me, a person authorized by law to   administer oaths, this   day of   Deca   2000    Authority To Administering Oath    (Typed Name of Person Administering Oath)   (Authority To Administer Oaths)

PAGE 3, DA FORM 2823, DEC 1998

OFFICIAL USE ONLY

EXHIBIT 01354

		OMODE: 4	PTATEMENT	<u> </u>		
	For use of this		STATEMENT 45; the proponent agency	is ODCSOPS	_	
	Title 10 USC Section 301; Title 5 USC Se		CT STATEMENT	943 <i>(SSN)</i> .		
AUTHORITY: PRINCIPAL PURPOSE:	Title 10 USC Section 301; 11tle 5 USC Section	ent officials with n	neans by which information	n 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.	109C-9(D	6-4	4 FH F NUMBER	
1. LOCATION	Aca (BSA)	2. DATE	(YYYYMMDD)	3. TIME	4. FILE NUMBER	
Stignale Hulding	MIDDLE NAME  674-4,66-4	1 (208)	12 09 6. SSN 67C-4, K	17600	7. GRADE/STATUS E-5 / Active	
8. ORGANIZATION OR ADDRE				•		
	pac-11,664	1 100/-41	4~4	DWING STATEMENT UNDER C		
, , ,	Dec \$3 At 2346 hrs. PFC	PFC	and Myself Assu	med duty at the I		
	continued to pull his sandbay					
	" At PT exercise for					
SO I took his	handwiff, off and put the	con behind b	is back and sm	oked him for Awa	the 20 minutes	before
I sat him down	. Between the hours of 23	do and alou	FFC and	I made sure t	he detaines w	Krz given
	nc, While #58 was on t	•				
Use the ground	to push away and up	his sandla	y so he could	Look Anound . I c	Continued to sit	+ himup
<b>5.</b>	his sandlay. He courting					
to go to sleep	At or around plue on	he Mornin	of Dand	3 he contined t	O MOVE AFUUN	d on the
floor and wou	ld not stay quiet. All l	re WANTED .	to do is conti	we to tain to	the other detail	times around
him. We told	him to shut up in ARAbi	u and Engli	ch. He finally o	calmed down Afte	( I Fort BA	ve him p
blanket and told	him to up to sleep. At	OR AROUND	USUN hours	ON OUTER SF		into.
the zoom to	have us wake up t	he detain	us. He notice		moving and	informed
me, We rolled by	in over, took off his s	andling And	1 Cooked dind	SPE CHILBRY	ecked for a	pulse but
said he couldn't	feel one I immediatly	had SAC	mula front	WHO STATEMENT	Hand SGT -4, 66.	of the
10. EXHIBIT	•	11.	INITIALS OF PERSON MA		PAGE 1 OF	PAGES
ADDITIONAL PAGES MUST	CONTAIN THE HEADING "STATEMENT OF		TAKEN A	IT DATED		
l	DITIONAL PAGE MUST BEAR THE INITIALS	OF THE PERSON M	IAKING THE STATEMENT,	AND PAGE NUMBER MUST B	RE BE INDICATED.	Judup
THE BUTTON OF EACH AD	STRUCTURE I AND MINOR DEATH THE WATHER					

DA FDRM 2823, DEC 1998 ACLU-RDI 142 p.16

OFFICIAL 225, NLT 2, IS OBSOLETE
USE ONLY

EXHIBIT

01355

USAPA V1.00

				03-C103		
USE THIS PAGE IF NEEDEL OF THIS PAGE IS	NOT NEEDED,	PLEASE PROCEED TO F	INAL PAG	E OF THIS FOR	Μ.	
107c-4166-4						
TATEMENT OF	TAKEN AT	IRAQ	DATED	2003	12	04
FINT (Continued)			<del></del>			
(Continued)						
Situation so they could call the medics						
076-1,106-1	У					
Q: SA 106-1						
A' SCT	_					
			•			
Q: DID # S8 MILKE ANT	UNUS	UAL MOISES	000	1106 TH	€	
MICHIT?		-			<u></u>	
0.41		_				
A: No				·····	<del></del>	_
Q: AT ANT TIME DID	±± 58°	ASK FOR	ME	DICAS		
X GI ANT THIS SHOP						_
ASSISTANCE?		<u></u>		<u></u>		
A: No						
DID TOU DBSEIZUE	100-4 W1+5	SLEEPING?	PRIS	ONEIL	700	<u> </u>
To Jo Chief III						
A: No						
A: No			<u> </u>			
	IEN TO.	) FOUND	-111M )			
Q' HOW WAS # 58 WH			HIIM?			
			HIM?			
A: Sandbay over his head, blanket on him an	nd cuffed	Lehind him		INC A	.N7 (	
A: SANDLAS OVER his head, blanket on him AND AS APPEAR	nd cuffed	Lehind him		INC A	.N7 (	 o <i>∈</i>
A: SANDLAS OVER his head, blanket on him AND AS APPEAR	nd cuffed	Lehind him		TINC A	.N7 (	o <i>∈</i>
Q: HOW WAS # S8 WH  A: SANdbay over his head, blanket on him AN  Q: DID # S8 APPEAR  THE CORRECTIONAL TO	nd cuffed	Lehind him		INC A	.N7 (	 o <i>E</i> -
A: SANDLAS OVER his head, blanket on him AND AS APPEAR	nd cuffed	Lehind him		INC A	.N7 (	 o <i>€</i> =
A: SANDLAS WAS # S8 WH  A: SANDLAS OVER his head, blanket on him AN  B: DID # S8 APPEAR  THE CORRECTIONAL TO  A: NO	NAINING	Exercises?	5 00		N7 (	o <i>E</i>
Q: HOW WAS # S8 WH  A: SANdbay over his head, blanket on him AN  Q: DID # S8 APPEAR  THE CORRECTIONAL TO	NAINING	Exercises?	5 00		.N7 (	
A: SANDLAS OVER his head, blanket on him AND THE CORRECTIONAL TO A: NO Q: WHEN DID TOU LAST	TO HILVE  RAINING  SEE  G. I Moved	EXENCISES?	ALIVE	- ?		
Q: HOW WAS # S8 WH  A: SANDLAY OVER his head, blanket on him AN  Q: DID # S8 APPEAR  THE CORRECTIONAL TO  A: NO  Q: WHEN DID TOU LAST  A: At DID I Noticed his LAWKET WAS OF  Q: DID # S8 CIUE	TO HIMVE RAINING SEE  F I Moved	EXENCISES?	ALIVE	- ?		
A: SANDLAY OVER his head, blanket on him AND THE CORRECTIONAL TO A: NO CAST  A: At DID I Noticed his Lawket was of	TO HIMVE RAINING SEE  F I Moved	EXENCISES?	ALIVE	enter back		

PAGE 2, DA FORM 2823, DEC 1998

OF

OFFICIAL USE ONLY

EXHIBIT 8

ORGANIZATION OR ADDRESS  (Authority To Administer Oaths)  A 17 13 6 UC M J				140-	03-010389-61697
NO  INCIDENCE AND LIFE SAULNE MISSURES ATTEMPTED ON  STATEMENT TO HOD TO YOUR  STATEMENT TO HOD TO YOUR  STATEMENT TO HOD TO YOUR  STATEMENT IS THE LIMB BY FACE IN MORE HOUSE MITTALED ALL CORRECTIONS AND HAVE INSTITUTED BY THE ENTIRE STATEMENT IN HAVE HAVE INTIMED THE DOTTION OF ACCIPACE CONTINUED FOR STATEMENT IN HAVE HAVE INTIMED THE DOTTION OF ACCIPACE CONTINUED THE STATEMENT IN HAVE HAVE INTIMED THE DOTTION OF ACCIPACE CONTINUED THE STATEMENT IN HAVE HAVE INSTITUTED BY DISTRIBUTING AND WITHOUT CORRESPOND UNLAWNED, AND WITHOUT CORRESPOND UNLAWNED IN HUMBLES TO BE DISTRIBUTED BY BY TO SERVING HE WAS AND HAVE MITTALED THE DOTTION OF ACCIPACE CONTINUED AND HAVE AND STREET WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT CORRESPOND UNLAWNED, ON UNLAWNED, ON UNLAWNED, AND HAVE	TEMENT OF	TAKEI	N AT	DATED	
NO  INCLUDE AND LIFE SAULNE MEASURES ATTEMPOTED ON  STATEMENT TO HOD TO TOUR  STATEMENT TO HOD TO TOUR  STATEMENT TREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT AND WITHOUT CORRUPTING THE MAKE STATEMENT. HAVE MADE THE STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT AND WITHOUT CORRUPTING MAKE MATCH INDUCTORENT.  WITNESSES:  WITNESSES:  SECRETICAL AND THE STATEMENT IS THE PUNISHMENT OF PUNISHMENT AND WITHOUT CORRUPT OF PUNISHMENT MAKE MATCH CONTINUED.  SECRETICAL PROPERTY OF PUNISHMENT AND WITHOUT CORRUPT OF PUNISHMENT MATCH CONTINUED.  SECRETICAL PROPERTY OF PUNISHMENT AND WITHOUT CORRUPT OF PUNISHMENT MAD WITHOUT CORRUPT	TATEMENT <i>(Continued)</i>		· · · · · · · · · · · · · · · · · · ·	, 2	
THE SAULUS MEASURES ATTEMPTED ON TO TOUCE STATEMENT AND ENDS OF STATEMENT AND ENDS OF AGE 1, AND ENDS OF AGE 3. I FULLY UNDESTAND THE CONTENTS OF THE ENTIRE STATEMENT HAVE MADE THIS STATEMENT IN THE THE STATEMENT IN THE THE STATEMENT IN THE STA	TWAS IN MA	- TYPE OF	7313 778 6-33		
AFIDAVIT  MINUTE BERING ON PAGE 1, AND ENDS ON PAGE  STATEMENT STREET IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE ENTITIAND FINE STATEMENT. I HAVE MADE THIS STATEMENT I TREET WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COENCIRM, UNLAWFUL WILLIAMS.  WITHERSESS.  WITHERSESS.  WITHERSESS.  WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COENCIRM, UNLAWFUL WILLIAMS. STATEMENT.  WITHERSESS.  WITHERSESS.  WITHERSESS.  WITHOUT OF PRICE Administrating Dath),  WITHERSESS.  WITHERSESS.  WITHERSESS.  WITHERSESS.  WITHOUT OF PRICE Administrating Dath),  WITHERSESS.  WITHERSESS.	No				
THE STATEMENT OF AUDIENS STATEMENT IN THE STATEMENT HAVE MADE THIS STATEMENT HAVE MADE THIS STATEMENT HAVE MADE THIS STATEMENT HAVE MADE THIS STATEMENT HAVE MADE THIS STATEMENT FREILY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT CORROYAL UNLAWFUL INTUDENCE, ON UNLAWFUL HOUCKMENT.  WITNESSES:  Subscribed and swom to before me, a person subting of the way to administer oaths, this g days of the swo to define me, a person subting of the way to administer oaths, this g days of the swo to before me, a person subting of the world of the swom to before me, a person subting of the world of the swom to before me, a person subting of the world of the swom to before me, a person subting of the world of the swom to before me, a person subting of the world of the swom to before me, a person subting of the world of the swom to before me, a person subting of the swom to before me, a person subting of the world of the swom to before me, a person subting of the world of the swom to before me, a person subting of the world of the swom to before me, a person subting of the world of the swom to before me, a person subting of the world of the swom to before me, a person subting of the world of the swom to before me, a person subting of the swom to before me, a person subting of the world of the swom to before me, a person subting of the swom to before me, a person subting of the swom to before me, a person subting of the swom to before me, a person subting of the swom to before me, a person subting of the swom to before me, a person subting of the swom to before me, a person subting statement which we have the swom to before me, a person subting statement which we have the swom to before me, a person subting statement which we have the swom to before me, a person subting statement which we have the swom to be	: WERE ANY	LIFE SAUL	or measur	LES A776	14 P761) ON
STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT CORRESS.  WITNESSES:  AFFIDAVIT  AFFIDAVIT  AFFIDAVIT  I MAYE READ OR NAVE HAD READ TO ME THIS STATEMENT  WISDLEBGINS ON PAGE  3. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT IMADE  BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF FACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS  STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT CORRIGON, UNLAWFUL INFLUENCE OR UNLAWFUL INFOURCEMENT.  WITNESSES:  SUBCIONED AND THE STATEMENT TO PRISON Making Statements  WITNESSES:  OKCAPITATION OR ADDRESS	10-4,064				
AFFIDAVIT  I HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT  I HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT  I HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT I HAVE MADE THIS BY THE STATEMENT IS THE LINE INTRIBUTED ALL CORRECTIONS AND 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 COERCIGIN, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.  WITNESSES:  Subscribed and sworm to before me, a person authory will have to administer on this, this   Gay of DECRETARY  ORGANIZATION OR ADDRESS  (Signature of Person Administering Oath), USA-1,		AUE ANTTH	-11NG 70	HOD 70	YOUR
AFIDAWIT  WHICH BESINS ON PAGE 1, AND ENDS ON PAGE  3. I FULLY UNDERSTAND THE CONTENTS OF THE ENTITIES STATEMENT WHICH BESINS ON PAGE 1, AND ENDS ON PAGE 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 FRELLY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCIGN, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.  WITNESSES:  Subscribed and sworm to before me, a preson authory of Faw to administer outs, this 9 day of 10 2003.  at 1000 10 10 2003.  IN CLUB 10 10 10 2003.  (Signature of Person Administering Outh), 10 10 10 10 10 10 10 10 10 10 10 10 10 1	STATEMENT				
AFFIDAVIT  I. HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT  WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE  3. 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 CONTINAING THE STATEMENT. I HAVE MADE THIS  STATEMENT FRELLY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCIPM, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.  WITNESSES:  Subscribed and sworm to before me, a person without policient of administer orbits, this 9 day of 18/2003.  at MUSUL 1A4Q  ORGANIZATION OR ADDRESS  (Signature of Person Administering Orbit), 16-1  (Typed Nation of Person Administering Orbit), 16-1  (Authority To Administer Orbits)  (Authority To Administer Orbits)	t: No end of state	67c-4,66-4			
WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 3. 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 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 BY ME. THE 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	700 500				
WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 3. 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 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 BY ME. THE 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					
WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE  3. I FULLY UNDERSTADD 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 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 BY ME. THE STATEMENT IS TRUE. I HAVE MADE THIS BY ME. THE STATEMENT IS TRUE. I HAVE MADE THIS BY ME. THE STATEMENT HAVE MADE THIS BY ME. THE STATEMENT IS TRUE. I HAVE MADE IN STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.  STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.  SUBSCRIBED AND MAKING STATEMENT.  SUBSCRIBED AND MAKING STATEMENT.  SUBSCRIBED AND MAKING STATEMENT.  I SUBSCRIBED AND MAKING					
WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 3. 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.  WITNESSES:  Subscribed and sworn to before me, a person author of law to administer oaths, this 9 day of 12003 at 1000 Unlawful 1000 On Address  (Signature of Person Administering Oath), ORGANIZATION OR ADDRESS  (Signature of Person Administering Uath)  (Typed Name of Person Administering Uath)  (Authority To Administer Oaths)  (Authority To Administer Oaths)					
WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 3. 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.  WITNESSES:  Subscribed and sworn to before me, a person author of law to administer oaths, this 9 day of 12003 at 1000 Unlawful 1000 On Address  (Signature of Person Administering Oath), ORGANIZATION OR ADDRESS  (Signature of Person Administering Uath)  (Typed Name of Person Administering Uath)  (Authority To Administer Oaths)  (Authority To Administer Oaths)					
WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 3. 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.  WITNESSES:  Subscribed and sworn to before me, a person author of law to administer oaths, this 9 day of 12003 at 1000 Unlawful 1000 On Address  (Signature of Person Administering Oath), ORGANIZATION OR ADDRESS  (Signature of Person Administering Uath)  (Typed Name of Person Administering Uath)  (Authority To Administer Oaths)  (Authority To Administer Oaths)					
WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 3. 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.  WITNESSES:  Subscribed and sworn to before me, a person author of law to administer oaths, this 9 day of 12003 at 1000 Unlawful 1000 On Address  (Signature of Person Administering Oath), ORGANIZATION OR ADDRESS  (Signature of Person Administering Uath)  (Typed Name of Person Administering Uath)  (Authority To Administer Oaths)  (Authority To Administer Oaths)					
WITNESSES:  Subscribed and sworn to before me, a person author of lact page of pay of	676-4, 66-4		. HAVE READ OR HAVE HA	O READ TO ME THIS STATE	MENT
WITNESSES:  WITNESSES:  Subscribed and sworn to before me, a person author of law to administer oaths, this 9 day of 182003 at 1000 Inc. 1, 400 Inc. 1		TANK THE PROPERTY OF THE PARTY	INITIALED THE DOTTOM OF FA	CH PAGE CONTAINING THE S	STATEMENT. I HAVE MADE THIS
WITNESSES:  Subscribed and sworn to before me, a person author sy law to administer oaths, this 9 day of DE 2003.  at MOSUL 17.4 Q  ORGANIZATION OR ADDRESS  (Signature of Person Administering Dath), bqc-1, bb-1  (Authority To Administer Daths)  A MOSUL 13 & UC M J	STATEMENT FREELY WITHOUT HOPE OF BEN	EFIT OR REWARD, WITHOUT THREAT OF	PUNISHMENT, AND WITHOUT	BELLOIDI, GREAT	
Subscribed and sworn to before me, a person author by law to administer oaths, this 9 day of 08-12003.  at MOSUL 17.4 Q  (Signature of Person Administering Oath), bqc-1, bd-1  (Typed Name of Person Administering Uath)  (Authority To Administer Oaths)  A CO 13 G CC M 3					
ORGANIZATION OR ADDRESS  (Signature of Person Administering Oath), (Signature of Person Administering Oath), (Typed Name of Person Administering Uath)  (Authority To Administer Oaths)  A CO 13 6 CC M 3				b	76-4,00-4
ORGANIZATION OR ADDRESS  (Signature of Person Administering Oath), bqc-1, bb-1  (Typed Name of Person Administering Uath)  (Authority To Administer Oaths)  A CO 13 6 CC M 3	WITNESSES:		Subscribed and swor administer oaths, this	n to before me, a person auth	2003
ORGANIZATION OR ADDRESS  (Typed Name of Person Administering Uatin)  (Authority To Administer Oaths)  A C 13 6 CC M 3			at Mo	SUL INAC	8
ORGANIZATION OR ADDRESS  (Typed Name or Person Administering Ustra)  (Authority To Administer Oaths)  A CO 13 6 CC M 3	ODG ANITATION OR ARRESTO			(Signature of Person Adn	ninistering Oath) ,
ORGANIZATION OR ADDRESS	ARPANICATION OR ADDRESS				bac-1, 66-1
ORGANIZATION OR ADDRESS			SA		6FC-1,66-
INITIALS OF PERSON MAKING STATEMENT  PAGE 3 OF PAGES	ORGANIZATION OR ADDRESS	6ac-4,664		(Authority To Admir	6 ucms
	INITIALS OF PERSON MAKING STATEMENT			PAGI	E 3 OF 3 PAGES

PAGE 3, DA FORM 2823, DEC 1998 ACLU-RDI 142 p.18 OFFICIAL USE ONLY

EXHIBIT &

#### 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. Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.

ROUTINE USES: DISCLOSURE:

Disclosure of your social security number is voluntary. 131.4 6.4 6.4

1. LOCATION R H A

2. DATE (YYYYMMDD) 3. TIME 4. F

5. LAST NAME, FIRST NAME, MIDDLE NAME \$70-4 (\$6-4

03) ec 9 11:2

7. GRADE/STATUS

E-3

8. ORGANIZATION OR ADDRESS

GRE-4166-4 2-44 ADA

Bravo BH

\_\_\_\_

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

Prior to wake up the prisoner hands zip tied behind his back because of falvire to follow instructions on taking his skind bag off head so he couldn't sec. After that the prisoners where put to sleep, the inmate deacesst was talking on severial acasions fler having his blanket thrown back on him went to sleep. The next seven or eight we were about to I was still sitting a chair next to the door when I heard ask for help because he said that this guy might be After that the prisoners sand bas was removed was checked for a pulse bax After he didn't have one PFC from the off room to come and were called and then half the Prisoners were

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

AGE 1 OF 2 PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_

AKEN AT DATED

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER

DA FURM 2823, DEC 1998

LISE ONLY

01358

MUST BE BE INDICATED.

* **				40-03-	CID389 -	61697
	AC-1,66-7	TAKEN AT	DΔ	red 9	Dec 03	
ATEMENT OF		TAKEN AT	DA			
STATEMENT (Continued	<del>(</del> )					
e at we to sel						
69C-4,66.4	anoth of	room , were	I vas	Sen	+	
	OUD THE	\ nc:car	re Co	, the	Senra	te
to	watch ou	ver the prison	, ,,	, , ,	- Cp	,
Coar	, // [ \	ras on shift	at 11	at m	sht a	nd
1007	was	ras on shift there all nigh	h+."			
10754, 100-1 2: SA						
1: PFC	6764,66-4					
2: DID PRISHO	R # F8 MAKE	ANY UNUSUAL NI	OISES BUIL	INC TH	E NIGH	rr?
4: didn't ma	ike any un-	seal noise's dur	ins the n	right.		
Z: DID # 58	REQUEST AN	T MEDICAL ASSIST	TANCE?			
T: NO						
2: DID YOU	OBSERVE ANT	TONE TOUCH # 58	WHILE H	E 645	SLEEPIT	υ <sub>ω</sub> ?
: No						
DO YOU +		70 AOO 7		STATE	4E~7.7	
6766	1,66-4	AFFIDAVIT				
		, HAVE READ C	R HAVE HAD REA	D TO ME THI	S STATEME	NT
BY ME. THE STATEMENT	T IS TRUE. I HAVE INITI	ALED ALL CORRECTIONS AND H HIS STATEMENT FREELY WITHOU CION, UNLAWFUL INFLUENCE. OF Subscribed administer oa	(Signature of Personal sworn to before this, this day	on Making Sine me, a perso	PORC-4/Letement)	o6-U
		at	105LL 11	2 A Q	<b></b> .	
			(Signature of Person	on Administer	<u> </u>	96-1 <sub>1</sub>
ORGANIZATION OR ADI	DRESS	<i>U</i>	694-1	, 66-1		
		SA	Typed Name of Per	son Administ	ering Oath)	
			27 136	UCMI		
ORGANIZATION OR AD	DRESS		(Authority To	Administer C	านเกร/	
NITIALS OF PERSON MAK	ING STATEMENT			PAGE 2	. of Z	PAGES
AGE 3, DA FUNN 2823, L	1676-4 166-4	- OFFICIAL				USAFA VI.G
			1	TON TUR	Tr (1	Linkly

ACLU-RDI 142 p.20

USE ONLY

EXHIBIT 9 3000040 01359

# Page(s)

41-46

## Referred to:

U.S. CENTRAL COMMAND
7115 SOUTH BOUNDARY BLVD
ATTN: CCJ6-DM
MACDILL AIR FORCE BASE
FLORIDA 33621-5101

MS. JACQUELINE SCOTT scottj@centcom.smil.mil (813) 827-5341/2830

0140-03-610361-61697

EXHOURT 11

For offscer use only

10000

DATE:

10 DEC 03

FROM:

CDR, 31<sup>ST</sup> MILITARY POLICE DETACHMENT (CID)

TO:

DIR, USACRC, USACIDC, FT BELVOIR VA

CDR, 10<sup>th</sup> MILITARY POLICE BATTALION (CID)(FWD) CDR, 3D MILITARY POLICE GROUP (CID) (FWD)

CDR, USACIDC, ATTN: CIOP-COP, FORT BELVOIR, VA

AFIP, ATTN: OAFME, ROCKVILLE, MD

PROVOST MARSHAL, 101<sup>ST</sup> AIRBORNE DIVISION (AIR ASSAULT)

SJA, 101<sup>ST</sup> AIRBORNE DIVISION (AIR ASSAULT)

CHIEF OF STAFF, 101<sup>ST</sup> AIRBORNE DIVISION (AIR ASSAULT)

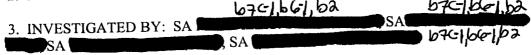
SUBJECT: CID REPORT OF INVESTIGATION – INITIAL/SSI – 0140-03-CID389-61697 – 5H9B

DRAFTER: RELEASER: 676-166-1

1. DATES/TIMES/LOCATIONS OF OCCURRENCES:

1. 9 DEC 2003/0300 – 9 DEC 2003/0730; BRIGADE HOLDING AREA (GRID COORDINATE 38S LF 308 190), MOSUL, IRAQ

2. DATE/TIME REPORTED: 9 DEC 03, 0930



- 4. SUBJECT: 1. NONE [UNDETERMINED MANNER OF DEATH]
- 5. VICTIM: 1. ABDUL KAREEM, ABDUREDA LAFTA (DECEASED); 25 OCT 1959;BAGHDAD, IRAQ; M; OTHER; [NFI] [UNDETERMINED MANNER OF DEATH]
- 6. INVESTIGATIVE SUMMARY: THE INFORMATION IN THIS REPORT IS BASED UPON AN ALLEGATION OR PRELIMINARY INVESTIGATION AND MAY CHANGE PRIOR TO THE COMPLETION OF THE INVESTIGATION.

"THIS IS AN OPERATION IRAQI FREEDOM INVESTIGATION"

THIS INVESTIGATION WAS INITIATED BASED ON INFORMATION PROVIDED BY THE S-3 COMMAND SERGEANT MAJOR, 503<sup>RD</sup> MILITARY POLICE BATTALION (MOSUL, IRAQ), WHO REPORTED A DETAINEE IN THE BRIGADE HOLDING AREA DIED WHILE IN U.S. CUSTODY.

PRELIMINARY INVESTIGATION REVEALED MR ABDUL KAREEM WAS DETAINED ON 5 DEC 03 BY ELEMENTS OF HHC, 3<sup>RD</sup> BATTALION, 502<sup>ND</sup> INFANTRY REGIMENT. MR ABDUL KAREEM WAS PENDING TRANSFER TO ANOTHER FACILITY AND WAS PLACED IN THE GENERAL POPULATION HOLDING AREA. MR ABDUL KAREEM WAS LAST OBSERVED AWAKE AT

FOR OFFICIAL USE ONLY

0300, 9 DEC 03 BY GUARDS STATIONED IN THE HOLDING AREA. MR ABDUL KAREEM DID NOT MOVE WHEN ORDERED TO WAKE UP AT 0730, 9 DEC 03 AND WAS CHECKED FOR HIS LACK OF RESPONSIVENESS. NO PULSE OR RESPERATION WAS APPARENT AND MEDICAL ATTENTION WAS REQUESTED.

ABOUT 0830, 9 DEC 03, DR EXAMINED MR ABDUL KAREEM AND PROUNCED HIM DEAD. NO EFFORTS TO RESUCITAE MR ABDUL KAREEM WERE ATTEMPTED, AS HIS PUPILS WERE FIXED AND UNRESPONSIVE TO LIGHT.

A CURSORY EXAMINATION BY CID PERSONNEL REVEALED MR ABDUL KAREEM DID NOT HAVE ANY VISIBLE INJURIES THAT WOULD HAVE CAUSED DEATH, AND FOUL PLAY IS NOT SUSPECTED.

AN AUTOPSY WILL BE CONDUCTED AND THE RESULTS ARE PENDING.

THE CID CASUALTY LIAISON OFFICER (CLO) IS CW2

31<sup>ST</sup> MILITARY POLICE DETACHMENT (CID), MOSUL, IRAQ AT DNVT 302-581-

INVESTIGATION CONTINUES BY CID.

7. CID REPORTS ARE EXEMPT FROM AUTOMATIC TERMINATION OF PROTECTIVE MARKINGS IN ACCORDANCE WITH CHAPTER 3, AR 25-55.

FOR OFFICIAL USE ONLY

けいけいしゅり

	INVESTIG	NTHVERBLAN	SEQUENCE NUMBER	389-61697
		200	CONTRACTOR CONTRACTOR	DATE:
DATE NOTED	77		•	
10 DEC 03	O ATTEN	1) AU70PSY	(PENDING AFIP ARRIVAL)	
	1	E DRAFT FI	NAL	
	S) FINISH	FINAL SA	EERH	
	S SIAME	PHOTO PA	CKE-7	
			ORT AFE WHEN	
	AFIP A	rrives for	L AUTOPS (	
	1		OUS ACTIVITY	COMPLETED
	FION SIGN PROP	COMPLETED	ACTION Sources targeted	COMPLETED
NCIC entry on st 2701 Given to V			Medical records requested	
2701 Given to W			Name check dispatched	
Case # on all doo			Name check results received	
Case won an doc	CONTACTS/PHO	NE NUMBERS	INVESTIGATIVE	STANDARDS
ACTIVIT	Y/PERSON 016-3,66-3	PHONE NUME	RER KVIGTIMS INTERVIEWED	24 hours
MORT AF	F-567		EYE WITNESSES INTERVIEY EVIDENCE DEPOSITED	1 duty day
15-6 M/A			LAB Evidence Serif RFA'S SENT OUT	5 duty days 5 duty days
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1090-3,66-3		MEANINGFUL INV ACTIVITY RFA FOLLOW UP	10 duly days 15 duly days
			KNOWN SUBJ FINALS UNFOUNDED FINALS	15 duty days 15 duty days
			UNKNOWN SUBJ FINALS ACTION TAKEN	30 cal days 30 cal days

## For Official Use Only



CONTROL NUMBER AGENT ACTIVITY SUMMARY 0140-03-CID389-61697 (CID REGULATION 195-D Summary of Investigative Activity Time, Date and Agent

About 0930, S-3 SGM, 503rd Military Police Battalion, Ft Bragg, NC 0930, 9 Dec 03 reported an Iraqi prisoner died while detained at 2nd Brigade Holding Area 676-166-1 SA (BHA), Mosul, Iraq. I:10 Depart Mosul AF, traveled to Brigade Holding Area (BHA) under MP 1015, 9 Dec 03 Escort. 676-1,66-1 1-99 1-106-1 (ALL SA'S) T: 45 Coordinated with WC 1040, 9 Dec 03 SA 10701, 160-1 1:5 Examination of Body. (See AIR for detail.) 1045, 9 Dec 03 67C-1,66+1 16754 BBY SA 1:60 Interview of CPT 1053, 9 Dec 03 (See Sworn Statement for details.) SA I: 20 64C-4166-4 Interview of SPC 1107, 9 Dec 03 6AC-1,160-1 (See Sworn Statement for details.) I: 10 bAC-4,66-4 1115, 9 Dec 03 67C-1, 66+1 Interviewed SGT (See Sworn Statement/AIR for details.) I: 15 Interview of PFC 1118, 9 Dec 03 (See Sworn Statement/AIR for details.) I: 15 Interview of PFC 1120, 9 Dec 03 bac-1,66-1 (See AIR for details) 1:

Conducted Canvass Interviews. SGT 1130, 9 Dec 03 (See AIR for details.)

For Official Use Only

PAGE:

CID FORM 28-E

	IDNEY DISTRICT	Serakinishing		SEQUENCE NUMBER	389-61697
				<b>学现在他</b>	
DATE NOTED	1-7	(A) 01.27 08 V	(DEL 17VI	W 450 48804	
10 DEC 03	1			UL AFIP ARRIVAL)	
	E) PREPARO	5 DRAFT FI	WAL		
	S) FINISH	FINAL SK	EFRH		<u> </u>
	(4) FINISH	PHOTO PA	CKE7		
	(5) coord	NATE W/M	ort aff	WHEN	
		RRIUGS FOR			
			··· <u>····</u>		
			<del></del>		
				· _ · · · · · · · · · · · · · · · · · ·	
	-				
	<del> </del>				
		MISCELLANI	OUS ACTIVIT	ACTION	COMPLETED
NCIC entry on st	FION Internation	COMPLETED	Sources targete	ACTION ad	COMPLETED
2701 Given to V			Medical record		
2701 Given to W			Name check d		
Case # on all doo	numents		Name check re		
	CONTACTS/PHO		VED 1237	INVESTIGATIVE S	STANDARDS
ACTIVIT	Y/PERSON 07C-3,66-3	PHONE NUME	FY	E WITNESSES INTERVIEW IDENCE DEPOSITED	
MORT AF			33333	B Evidence Sent A'S SENT OUT	5 duty days 5 duty days
15-6 M/	1076-366-3			EANINGEULINV ACTIVITY	10 duy.days
			K	A FOLLOW UP IOWN SUBJ FINALS	15 duly days 15 duly days
]			u	NFOUNDED FINALS NKNOWN SUBJ FINALS	15 duty days 50 cal days
			, AC	TION TAKEN.	30 cal days