

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
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION CAMP VICTORY	2. DATE (YYYYMMDD) 2004/05/07	3. TIME 2009	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS SPC	

8. ORGANIZATION OR ADDRESS
372nd Military Police Company

9. _____, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

I arrived to Abu Ghraib 1 October 2003. I worked in all areas, the Tiers, General Population and medical. I was mainly working in the general population and the medical area. I really didn't work in the MI Tier, Tier 1A. I was never aware or witnessed any abuse by MP or MI personnel, any photos or videos of detainees or dogs being used during interrogations. The only time I am aware that dogs were used was during riots. I never heard of MI encouraging MPs to give "the treatment or physically abuse a detainee. Supplies were limited and the only thing we had to give the detainee was a jumpsuit. We didn't have laundry set up so detainees washed their jumpsuit and hung it in their cell. I never saw detainees with women's underwear. They had boxers on. I was aware of "ghost" detainees. These detainees were brought in by OGA. They were not accounted for or kept tracked off. I had no knowledge of OGA abusing detainees.

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

A. No!

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

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT _____ TAKEN AT _____ DATED _____"

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

9. STATEMENT (Continued)

Nothing
[REDACTED]
[REDACTED]

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 243. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED]
(Signature of Person Making Statement)

WITNESSES:

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 7TH day of MAY, 2004 at CAMP VICTORY, BAGHDAD, IRAQ

[REDACTED]
(Typed Name of Person Administering Oath)
[REDACTED]
UCMJ, ARTICLE 136
(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT
MS

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