



DEPARTMENT OF THE ARMY  
HEADQUARTERS 4TH INFANTRY DIVISION (MECHANIZED)  
OFFICE OF THE STAFF JUDGE ADVOCATE  
TIKRIT, IRAQ

REPLY TO  
ATTENTION OF:

AFYB-JA-AL

07 September 2003

MEMORANDUM FOR Commander, 4th Infantry Division (Mechanized), FOB Ironhorse, Tikrit, Iraq

SUBJECT: AR 15-6 Investigation – Legal Review

1. In accordance with AR 15-6, paragraph 2-3, I have reviewed the AR 15-6 investigation into the 13 August 03 death of a detainee at Camp Warhorse. I make the following determinations:

- a. The proceedings comply with the legal requirements.
  - b. Errors in the proceedings, if any, do not have a material adverse effect on any individual's substantial rights.
  - c. Sufficient evidence supports the findings.
  - d. The recommendations are consistent with the findings.
2. The investigation is legally sufficient.
3. The point of contact is the undersigned at (DNVT) 534 [REDACTED] b6-2

[REDACTED] b6-2  
[REDACTED] b7C-2  
CPT, JA  
Administrative Law Attorney

6232

# INDEX OF ENCLOSURES AND EXHIBITS

## ENCLOSURES:

- I - Appointment Orders
- II - Rights Warning Certificate - [REDACTED]
- III - Rights Warning Certificate - [REDACTED]
- IV - Rights Warning Certificate - [REDACTED]
- V - Rights Warning Certificate - [REDACTED]
- VI - Rights Warning Certificate - [REDACTED]
- VII - Rights Warning Certificate - [REDACTED]
- VIII - Rights Warning Certificate - [REDACTED]
- IX - Rights Warning Certificate - [REDACTED]
- X - Rights Warning Certificate - [REDACTED]

b6-4/5  
b7c-4/5

## EXHIBITS:

- A. Coalition Authority Forces Apprehension Form
- B. Sworn Statement, [REDACTED], dated 14 Aug 03
- C. Sworn Statement, [REDACTED], dated 15 Aug 03
- D. Sworn Statement, [REDACTED], dated 16 Aug 03
- E. Sworn Statement, [REDACTED], dated 16 Aug 03
- F. Sworn Statement, [REDACTED], dated 16 Aug 03
- G. Sworn Statement, [REDACTED], dated 16 Aug 03
- H. Sworn Statement, [REDACTED], dated 16 Aug 03
- I. Sworn Statement, [REDACTED], dated 16 Aug 03
- J. Sworn Statement, [REDACTED], dated 16 Aug 03
- K. Sworn Statement, [REDACTED], dated 16 Aug 03
- L. Chronological Record of Medical Care.

b6-4/5  
b7c-4/5

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DEPARTMENT OF THE ARMY  
C CO, 64 FORWARD SUPPORT BATTALION  
3 BRIGADE COMBAT TEAM, 4 INFANTRY DIVISION (M)  
BALAD, IRAQ AP0-AE 09323

AECZ-FC-C

24 August 2003

MEMORANDUM FOR Commander, Task Force Ironhorse, ATTN: Chief of Staff,  
Headquarters, Task Force Ironhorse, Tikrit, Iraq

SUBJECT: Findings and Recommendations of Informal Investigation of death of Iraqi  
detainee [REDACTED]

1. FINDINGS

a. On 13 August 2003, Iraqi detainee [REDACTED] was declared dead due to  
cardiopulmonary arrest by [REDACTED], 2 BCT. The ailment(s)  
and medical conditions that led to the cardiopulmonary arrest are unknown as no autopsy  
was performed.  
b6-2/7c-2

b. Detainee [REDACTED] was a 56-year-old male that was apprehended on 3 August  
2003. He was brought to the detainee center at Camp Warhorse on the same day and  
Coalition Provisional Authority Forces Apprehension Form was completed. The 4<sup>th</sup> MP  
Co and E Co 204<sup>th</sup> FSB report that each new detainee undergoes a medical screening  
within 24 hours of arriving at the camp which includes listing chronic medications, a  
brief physical examination, and treating any significant injuries/ailments. The medical  
information is placed in the detainee's file. "Sick call" is provided daily by E Co 204  
FSB and all detainees have access to this service. "Sick call" encounters were not  
documented until 11 August 2003 when [REDACTED] required written documentation to  
be performed. Detainee [REDACTED] had no documentation of a medical screening or "sick  
call" encounters in his file.  
b6-2/7c-2

c. [REDACTED] reports that detainee [REDACTED] complained of being hot on the  
evening of 12 August 2003 and was let out of his cell to cool down. The detainee was  
given water to drink and water was poured on him by [REDACTED]. The detainee was  
placed back into his cell due to mortar fire and [REDACTED] heard nothing more from him  
that evening.  
b6-2/7c-2

d. On the 13<sup>th</sup> of August, detainee [REDACTED] was lying on the concrete outside of his  
cell. [REDACTED] was the medical officer tending to the detainees.  
She asked the MPs what was wrong and they informed her that the detainee had been  
feeling ill from the night prior. [REDACTED] reports that the detainee told him that he had  
stomach problems and couldn't eat meat and wanted milk. She informed the MPs that  
she wanted to see him after evaluating the new detainees. [REDACTED] reports that  
b6-2/7c-2

b6-4  
b7c-4

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SUBJECT: Findings and Recommendations of Informal Investigation of death of Iraqi detainee [REDACTED]

b(6)-4  
b7c-4

b64/b7c4

the detainee was able to walk without assistance and through another detainee that spoke English; she was able to determine that detainee [REDACTED] complained of his nose hurting. She obtained vital signs and examined his nose and found nothing to be abnormal. She instructed the MPs to send him to E Co 204 FSB if he worsened. [REDACTED] reports that [REDACTED] instructed the MPs to give the detainee extra water and two dairy shakes in the morning and evening. She reports that she documented her encounter and the MPs assisting her confirm she wrote a medical note but the note was not found during this investigation.

b6-1  
b7c-1

e. At approximately 1600 the same day, detainee [REDACTED] was let out of cell as he complained of being hot per [REDACTED] claims that the detainee complained of chest pain. The detainee was placed in the shade and given water. Within 30 minutes, detainee [REDACTED] was vomiting. [REDACTED] (MP medic) was summoned but was not in the area. E Co 204 FSB was called and [REDACTED] came to the detainee camp. [REDACTED] saw the detainee and decided to go to the aid station to ask the medical officers for further guidance. He arrived and was informed to give intravenous fluids and phenergan. Once he returned to the detainee camp, the detainee was noted to be unconscious without respirations or pulse. [REDACTED] confirmed that the detainee had no pulse and went to the aid station to get help. [REDACTED] had initiated CPR once the detainee became unresponsive. CPR was continued until the detainee was transported to E Co 204 FSB.

b6-2  
b7c-2

b6-1  
b7c-1

b6-1  
b7c-1

b6-4  
b7c-4

f. [REDACTED] was the medical officer in charge of running the code. Upon presentation, detainee [REDACTED] was unresponsive without spontaneous respirations or a pulse. CPR was resumed, IV access was obtained, and the detainee was intubated. Cardiac monitoring revealed ventricular tachycardia without a pulse. The detainee received defibrillation of 200-300-360 joules, followed by epinephrine and lidocaine and repeat defibrillation of 360 joules. No change in cardiac conversion was noted. Blood work revealed a glucose of 293, BUN 22, Sodium 140, potassium 3.8, hematocrit 29, pH 7.152, bicarbonate 9, and base excess of -20. An axial temperature was noted to be 104.0 F. On obtaining a rectal temperature, bowel function was noted to be lost. CPR was terminated and [REDACTED] declared the time of death at 1719. Medical care was appropriate and met the standard.

b6-2  
b7c-2

g. The conditions of the detainee camp are adequate. The detainees are given 5-6 bottles of water a day and can have more if they ask for it. All of the detainees have a rug or mat to sit or lie on. They are released from their cells to use the restroom and to walk in the courtyard at scheduled times but can also leave their cell if they request. The camp consists of two large cells that are designed to hold 30-35 adults each. There are two smaller cells that are used to separate detainees with tribal conflict or those that hold titles or power within the country. The MPs report that there are usually more detainees than they have room for so overcrowding has been an issue. The facility is clean without evidence of garbage or trash. There is no air conditioning or fans that circulate air. The cells are warm and the air is stagnant within them. Detainees are

AFZC-FC-C

SUBJECT: Findings and Recommendations of Informal Investigation of death of Iraqi detainee [REDACTED]

given three MREs a day but the MPs report that most of the detainees don't eat them as they complain of the smell and taste.

h. An interpreter from the MI BN is available on occasion but most of the time the MPs and medical personnel rely on other detainees to help with the language barrier. The MI interpreter claims that he had talked with detainee [REDACTED] in the past but not during this incident and has no knowledge of any medical history on the detainee.

i. The medical officers of E Co 204 FSB and the 1982 FST. Physicians, physician's assistants, nurse anesthetists, and registered nurses perform the medical evaluations and sick call duties at the detainee camp. Physicians and physician's assistants have credentials to provide this type of medical care, however, nurse anesthetists and registered nurses due not have the same practicing privileges. Individual's credential packets were not available for review.

## 2. RECOMMENDATIONS

a. All medical information and encounters should be documented. A paper trail becomes significant and is standard of care throughout the world. Documentation provides better care and protects those providing the care. Recommend that the initial medical screening and all medical encounters and interventions be documented and placed in the detainee's file.

b. Ensure all providers providing medical care have the appropriate credentials and skills. Many nurses have learned through their experiences how to care for individuals but they do not have the authority to examine, diagnose, and treat medical conditions. With that said, they may not have the knowledge base to recognize a problem that needs further attention. Recommend that nurses and nurse anesthetists provide care within the scope of their credentials. If nurses continue to provide care, recommend that the supervising physician provide a guideline for them to follow and list the conditions/procedures that they can perform autonomously and those conditions that need to be referred to a physician or physician assistant. Also recommend that all documentation be reviewed and signed by a physician with the appropriate credentials.

c. Interpreters are a must. It is apparent that many individuals had differing opinions as to what detainee # [REDACTED] was complaining of and the designated interpreter was not involved in any aspect of this case. Without the use of an interpreter and relying on another detainee to bridge the language gap, it becomes a guessing game as to what an individual is saying. If detainee [REDACTED] had chest pain the night prior to his death, no one was aware of it and that may be due to the language barrier. If this was known, his death may have been prevented. Recommend that an interpreter be readily available in all detainee camps, especially for the initial medical interview and during sick call.

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SUBJECT: Findings and Recommendations of Informal Investigation of death of Iraqi detainee [REDACTED]

b6-4  
b7c-4

d. Autopsy. To give a definitive cause of death, an autopsy is required. Without an autopsy I can not comment on whether or not detainee [REDACTED] death was related to his living conditions, heat, medical care (or lack of), or underlying ailments. Recommend that future deaths of Iraqi detainees undergo autopsy so more can be learned about the causative factors and can possibly help with future operations and care.

3. The POC is the undersigned (DNVT 534- [REDACTED])

(b)(6)-2  
(b)(7)(D)2

[REDACTED]  
MAJ, MC  
BN Surgeon, 64 FSB

6287

**REPORT OF PROCEEDINGS BY INVESTIGATING OFFICER/BOARD OF OFFICERS**

For use of this form, see AR 15-6; the proponent agency is OTJAG.

IF MORE SPACE IS REQUIRED IN FILLING OUT ANY PORTION OF THIS FORM, ATTACH ADDITIONAL SHEETS

**SECTION I - APPOINTMENT**

Appointed by

[REDACTED]

(b)(6)-2

(Appointing authority)

on 15 August 2003

(Date)

(Attach inclosure 1: Letter of appointment or summary of oral appointment data.) (See para 3-15, AR 15-6.)

**SECTION II - SESSIONS**

The (investigation) (board) commenced at 21st CSH, LSA Anaconda, Balad, Iraq

(Place)

at

1000 hours

(Time)

on 16 August 2003

(Date)

(If a formal board met for more than one session, check here . Indicate in an inclosure the time each session began and ended, the place, persons present and absent, and explanation of absences, if any.)

The following persons (members, respondents, counsel) were present: (After each name, indicate capacity, e.g., President, Recorder, Member, Legal Advisor.)

The following persons (members, respondents, counsel) were absent: (Include brief explanation of each absence.) (See paras 5-2 and 5-8a, AR 15-6.)

The (investigating officer) (board) finished gathering/hearing evidence at

1330 hours

(Time)

on

16 August 2003

(Date)

and completed findings and recommendations at

1800 hours

(Time)

on

24 August 2003

(Date)

**SECTION III - CHECKLIST FOR PROCEEDINGS**

**A. COMPLETE IN ALL CASES**

	YES	NO <sup>1/</sup>	NA <sup>2/</sup>
1. Inclosures (para 3-15, AR 15-6)			
Are the following inclosed and numbered consecutively with Roman numerals: (Attached in order listed)			
a. The letter of appointment or a summary of oral appointment data?			
b. Copy of notice to respondent, if any? (See item 9, below)	X		
c. Other correspondence with respondent or counsel, if any?			X
d. All other written communications to or from the appointing authority?			X
e. Privacy Act Statements (Certificate, if statement provided orally)?	X		X
f. Explanation by the investigating officer or board of any unusual delays, difficulties, irregularities, or other problems encountered (e.g., absence of material witnesses)?			X
g. Information as to sessions of a formal board not included on page 1 of this report?			X
h. Any other significant papers (other than evidence) relating to administrative aspects of the investigation or board?	X		

**FOOTNOTES:** <sup>1/</sup> Explain all negative answers on an attached sheet.

<sup>2/</sup> Use of the N/A column constitutes a positive representation that the circumstances described in the question did not occur in this investigation or board.

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		YES	NO
2	Exhibits (para 3-16, AR 15-6)		
	a. Are all items offered (whether or not received) or considered as evidence individually numbered or lettered as exhibits and attached to this report?		
	b. Is an index of all exhibits offered to or considered by investigating officer or board attached before the first exhibit?		X
	c. Has the testimony/statement of each witness been recorded verbatim or been reduced to written form and attached as an exhibit?		
	d. Are copies, descriptions, or depictions (if substituted for real or documentary evidence) properly authenticated and is the location of the original evidence indicated?		X
	e. Are descriptions or diagrams included of locations visited by the investigating officer or board (para 3-6b, AR 15-6)?		
	f. Is each written stipulation attached as an exhibit and is each oral stipulation either reduced to writing and made an exhibit or recorded in a verbatim record?		
	g. If official notice of any matter was taken over the objection of a respondent or counsel, is a statement of the matter of which official notice was taken attached as an exhibit (para 3-16d, AR 15-6)?		
3	Was a quorum present when the board voted on findings and recommendations (paras 4-1 and 5-2b, AR 15-6)?		
<b>B. COMPLETE ONLY FOR FORMAL BOARD PROCEEDINGS (Chapter 5, AR 15-6)</b>			
4	At the initial session, did the recorder read, or determine that all participants had read, the letter of appointment (para 5-3b, AR 15-6)?		
5	Was a quorum present at every session of the board (para 5-2b, AR 15-6)?		
6	Was each absence of any member properly excused (para 5-2a, AR 15-6)?		
7	Were members, witnesses, reporter, and interpreter sworn, if required (para 3-1, AR 15-6)?		
8	If any members who voted on findings or recommendations were not present when the board received some evidence, does the inclosure describe how they familiarized themselves with that evidence (para 5-2d, AR 15-6)?		
<b>C. COMPLETE ONLY IF RESPONDENT WAS DESIGNATED (Section II, Chapter 5, AR 15-6)</b>			
9	Notice to respondents (para 5-5, AR 15-6):		
	a. Is the method and date of delivery to the respondent indicated on each letter of notification?		
	b. Was the date of delivery at least five working days prior to the first session of the board?		
	c. Does each letter of notification indicate -		
	(1) the date, hour, and place of the first session of the board concerning that respondent?		
	(2) the matter to be investigated, including specific allegations against the respondent, if any?		
	(3) the respondent's rights with regard to counsel?		
	(4) the name and address of each witness expected to be called by the recorder?		
	(5) the respondent's rights to be present, present evidence, and call witnesses?		
	d. Was the respondent provided a copy of all unclassified documents in the case file?		
	e. If there were relevant classified materials, were the respondent and his counsel given access and an opportunity to examine them?		
10	If any respondent was designated after the proceedings began (or otherwise was absent during part of the proceedings):		
	a. Was he properly notified (para 5-5, AR 15-6)?		
	b. Was record of proceedings and evidence received in his absence made available for examination by him and his counsel (para 5-4c, AR 15-6)?		
11	Counsel (para 5-6, AR 15-6):		
	a. Was each respondent represented by counsel?		
	Name and business address of counsel:		
	(If counsel is a lawyer, check here <input type="checkbox"/> )		
	b. Was respondent's counsel present at all open sessions of the board relating to that respondent?		
	c. If military counsel was requested but not made available, is a copy (or, if oral, a summary) of the request and the action taken on it included in the report (para 5-6b, AR 15-6)?		
12	If the respondent challenged the legal advisor or any voting member for lack of impartiality (para 5-7, AR 15-6):		
	a. Was the challenge properly denied and by the appropriate officer?		
	b. Did each member successfully challenged cease to participate in the proceedings?		
13	Was the respondent given an opportunity to (para 5-8a, AR 15-6):		
	a. Be present with his counsel at all open sessions of the board which deal with any matter which concerns that respondent?		
	b. Examine and object to the introduction of real and documentary evidence, including written statements?		
	c. Object to the testimony of witnesses and cross-examine witnesses other than his own?		
	d. Call witnesses and otherwise introduce evidence?		
	e. Testify as a witness?		
	f. Make or have his counsel make a final statement or argument (para 5-9, AR 15-6)?		
14	If requested, did the recorder assist the respondent in obtaining evidence in possession of the Government and in arranging for the presence of witnesses (para 5-8b, AR 15-6)?		
15	Are all of the respondent's requests and objections which were denied indicated in the report of proceedings or in an inclosure or exhibit to it (para 5-11, AR 15-6)?		

FOOTNOTES: 1) Explain all negative answers on an attached sheet.  
 2) Use of the N/A column constitutes a positive representation that the circumstances described in the question did not occur in this investigation or board.



SECTION IV - FINDINGS (para 3-10, AR 15-6)

The (investigating officer) (board), having carefully considered the evidence, finds:

(SEE ATTACHED MEMO)

SECTION V - RECOMMENDATIONS (para 3-11, AR 15-6)

In view of the above findings, the (investigating officer) (board) recommends:

(SEE ATTACHED MEMO)

SECTION VI - AUTHENTICATION (para 3-17, AR 15-6)

THIS REPORT OF PROCEEDINGS IS COMPLETE AND ACCURATE. (If any voting member or the recorder fails to sign here or in Section VI, below, indicate the reason in the space where his signature should appear.)

\_\_\_\_\_  
(Recorder)  
\_\_\_\_\_  
(Member)  
\_\_\_\_\_  
(Member)

SEE ATTACHED FINDINGS + RECOMMENDATION MEMORANDUM  
\_\_\_\_\_  
Investigating Officer (President)  
\_\_\_\_\_  
(Member)  
\_\_\_\_\_  
(Member)

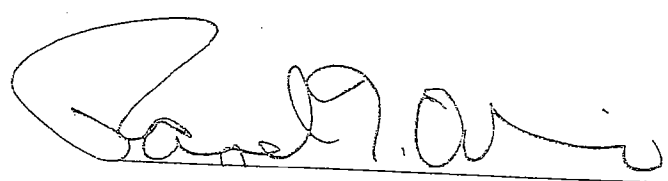
SECTION VII - MINORITY REPORT (para 3-13, AR 15-6)

To the extent indicated in Inclosure \_\_\_\_\_, the undersigned do(es) not concur in the findings and recommendations of the board. (In the inclosure, identify by number each finding and/or recommendation in which the dissenting member(s) do(es) not concur. State the reasons for disagreement. Additional/substitute findings and/or recommendations may be included in the inclosure.)

\_\_\_\_\_  
(Member) \_\_\_\_\_  
(Member)

SECTION VIII - ACTION BY APPOINTING AUTHORITY (para 2-3, AR 15-6)

The findings and recommendations of the (investigating officer) (board) are (approved) (disapproved) (approved with following exceptions/substitutions). (If the appointing authority returns the proceedings to the investigating officer or board for further proceedings or corrective action, attach that correspondence (or a summary, if oral) as a numbered inclosure.)



RECEIVED  
10 SEP 2003

RAYMOND T. ODIERNO  
Major General, USA  
Commanding

6291

DEPARTMENT OF THE ARMY  
3d BRIGADE COMBAT TEAM  
4<sup>th</sup> INFANTRY DIVISION (MECHANIZED)  
BALAD, IRAQ APO AE 09323-2612

AFCZ-FC-JA

5 September 2003

MEMORANDUM FOR RECORD

SUBJECT: AR 15-6 Investigation - Detainee Death at 2d BCT Detainment Facility.

1. This is to clarify the missing signature of the Investigating Officer [REDACTED] on the DA Form 1574. [REDACTED] completed her investigation with the findings and recommendations on 24 Aug 03. Her investigation was complete except for the DA Form 1574. [REDACTED] received a Red Cross Message and left the area before the DA Form 1574 could be completed. The 3d BCT Legal Cell filled in the enclosed DA Form 1574 using the investigation. [REDACTED] did sign her findings and recommendations memorandum.

b6-2  
b7c-2

2. POC is the undersigned at 534- [REDACTED]

[REDACTED]  
SSG, USA  
NCOIC, 3d BCT Legal Cell

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DEPARTMENT OF THE ARMY  
HEADQUARTERS TASK FORCE IRONHORSE  
TIKRIT, IRAQ

REPLY TO  
ATTENTION OF

AFYB-CG

15 August 2003

MEMORANDUM FOR: [REDACTED] C Company, 64th FSB

SUBJECT: Appointment as a 15-6 Investigating Officer

1. You are hereby appointed an investigating officer pursuant to AR 15-6 and AR 210-7, paragraph 4-3, to conduct an informal investigation into the shooting death of a detainee on 13 July 2003. Additionally, you are to identify any systemic problems that the command can address and correct, if necessary.

2. You will use informal procedures under AR 15-6, Chapter 4. You will make specific findings and recommendations on all relevant issues you identify in the course of your investigation. If, during your investigation, you suspect that persons you intend to interview may have violated any provision of the Uniform Code of Military Justice (UCMJ) or any other criminal law, you must advise them of their rights under the UCMJ, Article 31, or the Fifth Amendment, as appropriate. Rights warnings and waivers will be documented on DA Form 3881. Provide each witness a Privacy Act statement before you solicit any personal information. All witness statements will be sworn and recorded on DA Form 2823.

3. Before proceeding with the investigation, contact [REDACTED] at 534-[REDACTED] for an initial legal briefing. [REDACTED] will serve as your primary legal advisor.

4. Your report, together with all evidence marked as exhibits, will be submitted to me in memorandum format no later than ten days from the date you receive this memorandum. Submit any requests for delay to me either orally or in writing. You will obtain a written legal review prior to submitting the completed investigation.

FOR THE COMMANDER:

[REDACTED]

/COL, GS  
Chief of Staff

b6-2

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RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE II

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION: Rob Warhorse
2. DATE: 16 Aug 03
3. TIME: 1332
4. FILE NO.
5. NAME (Last, First, MI)
6. SSN
7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army CCo 6dFSB 38CT41A and wanted to question me about the following offense(s) of which I am suspected/accused: information regarding death of Iraqi detainee

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. For personnel subject to the UCMJ I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.

- or -

- (For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.
4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (if available)
1a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything
2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
  - a. Your official position.
  - b. Nature of offense(s).
  - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:
 

"Before I ask you any questions, you must understand your rights."

  - a. "You do not have to answer my questions or say anything."
  - b. "Anything you say or do can be used as evidence against you in a criminal trial."
  - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."
- Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent *i.e., fewer than 30 days ago*), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" *(If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)*

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

**RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE**

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE III

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 30, United States Code, Section 3012(g)  
 PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.  
 ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.  
 DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION <i>FOB Warhorse</i>	2. DATE <i>10 Aug 83</i>	3. TIME <i>1254</i>	4. FILE NO.
5. NAME (Last, First, MI) [REDACTED]	8. ORGANIZATION OR ADDRESS <i>4th MP Ft Hood TX</i>		
6. SSN [REDACTED]	7. GRADE/STATUS <i>PFC E-3</i>		

*b6-4  
b7C-4*

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army *C Co 64 FSB 3BCT 4ID* and wanted to question me about the following offense(s) of which I am suspected/accused: *information regarding death of Iraq detainee*  
 Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- I do not have to answer any question or say anything.
- Anything I say or do can be used as evidence against me in a criminal trial.
- (For personnel subject to the UCMJ)* I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. This lawyer can be a civilian lawyer I arrange for at no expense to the Government or a military lawyer detailed for me at no expense to me, or both.

- or -

*(For civilians not subject to the UCMJ)* I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. I understand that this lawyer can be one that I arrange for at my own expense, or if I cannot afford a lawyer and want one, a lawyer will be appointed for me before any questioning begins.

- If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)		3. SIGNATURE OF INTERVIEWEE
1a. NAME (Type or Print)		
b. ORGANIZATION OR ADDRESS AND PHONE		4. SIGNATURE OF INVESTIGATOR [REDACTED]
2a. NAME (Type or Print) [REDACTED]		5. TYPED NAME OF INVESTIGATOR <i>[REDACTED]</i>
b. ORGANIZATION OR ADDRESS AND PHONE <i>2/4 MP Co., Camp Warhorse</i>		6. ORGANIZATION OF INVESTIGATOR <i>C Co 64 FSB 3BCT 4ID</i>

*b6-4  
b7C-4*

*b6-2  
b7C-2*

Section C. Non-waiver

- I do not want to give up my rights  
 I want a lawyer  I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
  - a. Your official position.
  - b. Nature of offense(s).
  - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:
 

"Before I ask you any questions, you must understand your rights."

  - a. "You do not have to answer my questions or say anything."
  - b. "Anything you say or do can be used as evidence against you in a criminal trial."
  - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)



RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE  
For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)  
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.  
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.  
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION - FOB Workhorse	2. DATE 16 Aug 03	3. TIME 1245	4. FILE NO.
5. NAME (Last, First, MI) [REDACTED]	8. ORGANIZATION OR ADDRESS [REDACTED]		
6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]		

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army 1st Co 64FSB 3BCT and wanted to question me about the following offense(s) of which I am suspected/accused: information regarding death of Iraqi detainee  
Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- I do not have to answer any question or say anything.
- Anything I say or do can be used as evidence against me in a criminal trial.
- (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. This lawyer can be a civilian lawyer I arrange for at no expense to the Government or a military lawyer detailed for me at no expense to me, or both.

- or -

- (For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. I understand that this lawyer can be one that I arrange for at my own expense, or if I cannot afford a lawyer and want one, a lawyer will be appointed for me before any questioning begins.
- If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)		3. SIGNATURE OF INTERVIEWEE [REDACTED]
1a. NAME (Type or Print)	b. ORGANIZATION OR ADDRESS AND PHONE	4. SIGNATURE OF INVESTIGATOR [REDACTED]
2a. NAME (Type or Print)		5. TYPED NAME OF INVESTIGATOR [REDACTED]
b. ORGANIZATION OR ADDRESS AND PHONE		6. ORGANIZATION OF INVESTIGATOR [REDACTED]

Section C. Non-waiver

- I do not want to give up my rights  
 I want a lawyer  
 I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

## PART II - RIGHTS WARNING PROCEDURE

## THE WARNING

1. WARNING - Inform the suspect/accused of:
  - a. Your official position.
  - b. Nature of offense(s).
  - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:
 

"Before I ask you any questions, you must understand your rights."

  - a. "You do not have to answer my questions or say anything."
  - b. "Anything you say or do can be used as evidence against you in a criminal trial."
  - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

## THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

## SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

## PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

## PART II - RIGHTS WARNING PROCEDURE

## THE WARNING

1. WARNING - Inform the suspect/accused of:
  - a. Your official position.
  - b. Nature of offense(s).
  - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:
 

"Before I ask you any questions, you must understand your rights."

  - a. "You do not have to answer my questions or say anything."
  - b. "Anything you say or do can be used as evidence against you in a criminal trial."
  - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

## THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

## SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

## PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE I

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION: FOB Warhorse
2. DATE: 10 Aug 03
3. TIME: 1230
5. NAME: [Redacted]
6. SSN: [Redacted]
7. GRADE/STATUS: [Redacted]
8. ORGANIZATION OR ADDRESS: [Redacted]

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C Co 64FSB 3BCT 47A and wanted to question me about the following offense(s) of which I am suspected/accused: information regarding death of Iraqi detainees. Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.
4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)
1a. NAME (Type or Print)
1b. ORGANIZATION OR ADDRESS AND PHONE
2a. NAME (Type or Print)
2b. ORGANIZATION OR ADDRESS AND PHONE
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

- 1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything
2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED
DA FORM 3881, NOV 89 EDITION OF NOV 84 IS OBSOLETE 6301 USAPA 2.01

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE VI

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION: FOB War Horse
2. DATE: 16 Aug 03
3. TIME: 1104
4. FILE NO.
5. NAME (Last, First, MI)
6. SSN
7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C Co 64FSB3BCTAI and wanted to question me about the following offense(s) of which I am

suspected/accused: interview regarding death of Iraqi detainee
Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.

- or -

(For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. I understand that this lawyer can be one that I arrange for at my own expense, or if I cannot afford a lawyer and want one, a lawyer will be appointed for me before any questioning begins.

- 4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)
1a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

- 1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

## PART II - RIGHTS WARNING PROCEDURE

## THE WARNING

1. WARNING - Inform the suspect/accused of:
  - a. Your official position.
  - b. Nature of offense(s).
  - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:
 

"Before I ask you any questions, you must understand your rights."

  - a. "You do not have to answer my questions or say anything."
  - b. "Anything you say or do can be used as evidence against you in a criminal trial."
  - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

## THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

## SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

## PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

6303

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE VI

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION: FOB War Horse
2. DATE: 16 Aug 03
3. TIME: 1104
4. FILE NO.
5. NAME (Last, First, MI)
6. SSN
7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C. Co 64 FSB 3 BCT AI and wanted to question me about the following offense(s) of which I am suspected/accused: interview regarding death of Iraqi detainee

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.
4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)
1a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

- 1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

6304

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

WARNING - Inform the suspect/accused of:

- a. Your official position.
- b. Nature of offense(s).
- c. The fact that he/she is a suspect/accused.

RIGHTS - Advise the suspect/accused of his/her rights as follows:  
"Before I ask you any questions, you must understand your rights."

- a. "You do not have to answer my questions or say anything."
- b. "Anything you say or do can be used as evidence against you in a criminal trial."
- c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer, before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

If the suspect/accused says "yes," find out when and where. If the request is recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases a waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of a set interrogation, completion may be temporarily postponed. Notes should be made on the circumstances.

FOR INCRIMINATING STATEMENTS:

- 1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

- 2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

6305



RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE-11

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION: FOB Warhorse
2. DATE: 10 Aug 03
3. TIME: 1128
4. FILE NO.
5. NAME: [Redacted]
6. SSN: [Redacted]
7. GRADE/STATUS: [Redacted]
8. ORGANIZATION OR ADDRESS: [Redacted]

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C Co 64 FSB 2 BCT 4 ID and wanted to question me about the following offense(s) of which I am suspected/accused: information regarding detainee frag detainees. Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.
4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)
1a. NAME (Type or Print)
1b. ORGANIZATION OR ADDRESS AND PHONE
2a. NAME (Type or Print)
2b. ORGANIZATION OR ADDRESS AND PHONE
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

- 1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
  - a. Your official position.
  - b. Nature of offense(s).
  - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:
 

"Before I ask you any questions, you must understand your rights."

  - a. "You do not have to answer my questions or say anything."
  - b. "Anything you say or do can be used as evidence against you in a criminal trial."
  - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"  
 (If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"  
 (If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"  
 (If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

6307

RIGHTS WAIVER PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE VIII

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your Social Security Number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your Social Security Number is voluntary.

1. LOCATION: FCB Warhorse
2. DATE: 16 Aug 03
3. TIME: 1115
4. FILE NO.
5. NAME (Last, First, MI): [Redacted]
6. SSN: [Redacted]
7. GRADE/STATUS: [Redacted]
8. ORGANIZATION OR ADDRESS: [Redacted]

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army CCo 64FSB 3BCT+ID

and wanted to question me about the following offense(s) of which I am suspected/accused: information regarding death of detainee (Frager)

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.

(For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.

- 4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)
1a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

- 1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

6308

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
  - a. Your official position.
  - b. Nature of offense(s).
  - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:
 

"Before I ask you any questions, you must understand your rights."

  - a. "You do not have to answer my questions or say anything."
  - b. "Anything you say or do can be used as evidence against you in a criminal trial."
  - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

6309

RIGHT TO HEAR AND BE HEARD PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
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.

Form with fields: LOCATION (CAMP WARHORSE), NAME (Last, First, MI), SSN, DATE (16 AUG 03), TIME (1041), FILE NO., ORGANIZATION OR ADDRESS, GRADE/STATUS.

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C Co 6 AF SB 3 BCT 4 T and wanted to question me about the following offense(s) of which I am suspected/accused: incident of Iraqi detainees death

I do not have to answer any question or say anything.
Anything I say or do can be used as evidence against me in a criminal trial.
If for personnel subject to the UCMJ I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.

If for civilians not subject to the UCMJ I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.

If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

Form with fields: WITNESSES (Name, Organization), SIGNATURE OF INTERVIEWEE, SIGNATURE OF INVESTIGATOR, TYPED NAME OF INVESTIGATOR, ORGANIZATION OF INVESTIGATOR.

Section C. Non-waiver

I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything

SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

6310

## PART II - RIGHTS WARNING PROCEDURE

## THE WARNING

1. WARNING - Inform the suspect/accused of:
  - a. Your official position.
  - b. Nature of offense(s).
  - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:
 

"Before I ask you any questions, you must understand your rights."

  - a. "You do not have to answer my questions or say anything."
  - b. "Anything you say or do can be used as evidence against you in a criminal trial."
  - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

## THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" *If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.*

## SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

## PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

6311

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

ENCLOSURE X

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
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.

Table with 4 columns: LOCATION, DATE, TIME, FILE NO. and 4 rows: NAME, ORGANIZATION OR ADDRESS, SSN, GRADE/STATUS. Includes handwritten notes like 'FOB Warhorse' and '16 Aug 03 10:50'.

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C Co 64FSB 38CT AEN and wanted to question me about the following offense(s) of which I am suspected/accused: information regarding clearing Iraqi detainees.

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. For personnel subject to the UCMJ I have the right to talk privately to a lawyer before, during, and after questioning...
4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time...

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

Table with 6 rows: WITNESSES (1a, 1b), SIGNATURE OF INTERVIEWEE, SIGNATURE OF INVESTIGATOR, TYPED NAME OF INVESTIGATOR, ORGANIZATION OF INVESTIGATOR. Includes handwritten notes like 'b6-4 b7C-4' and 'b6-2 b7C-2'.

Section C. Non-waiver

- 1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
  - a. Your official position.
  - b. Nature of offense(s).
  - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:
 

"Before I ask you any questions, you must understand your rights."

  - a. "You do not have to answer my questions or say anything."
  - b. "Anything you say or do can be used as evidence against you in a criminal trial."
  - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)



**ARMY FORCES APPREHENSION REPORT**  
 (NOT APPLICABLE, UPON APPROVAL)

or then describe:

- Burglary or Housebreaking (I.P.C. 45)
- Robbery (I.P.C. 399)
- Theft (I.P.C. 439)
- Destruction of Property (I.P.C. 477)
- Obstructing a Public Highway/Place (I.P.C. 473)
- Discharging Firearm/ Explosive in City (I.P.C. 45D)
- Riot or Breach of Peace (I.P.C. 49(3))
- Other

If Other, then describe: *Hotel Room Property*

- Trespass on Military Installation or Facility
- Photographing/Surveillance of Military
- Obstructing Performance of Military
- Other

Theft of Common Force Property

Apprehending Unit: *D-2820* Location Grid: *AG S276 3333 17*  
 Date of Incident (D/M/Y): *3 18 103* Time of Incident: *2000* hrs to *0600* hrs Date of Report (D/M/Y): *3 18 103*

Offense #: *375,2008* Key Connected Person:  Victim  Suspect  
 Last Name: [Redacted] Given Name: [Redacted] First Name: [Redacted] Given Name: [Redacted]

b6-4  
b7C-4

Height: [Redacted] in Eye-Color: [Redacted] Address: [Redacted]  
 Place of Birth: [Redacted] Ethnic/Tribal Group: [Redacted] Sex: [Redacted]  
 Regular:

Passport  Dr. license  Other (specify): [Redacted] Passport  Dr. license  Other (specify): [Redacted]  
 Document #: [Redacted]

Persons involved: [Redacted] (List names/identifying info on reverse under "Additional Incident Information")

Vehicle Identification: [Redacted] Vehicle Number: [Redacted] ref. [Redacted] Vehicle(s): [Redacted] Owner: [Redacted]  
 Make: [Redacted] Color: [Redacted] VIN: [Redacted]  
 Type: [Redacted] Plate No.: [Redacted] Number of People in Vehicle: [Redacted]  
 Names of People in Vehicle: [Redacted]

Weapon: [Redacted] Photo Taken of Suspect with Weapon:  Contraband: [Redacted]  
 Model: [Redacted] Color/Caliber: [Redacted]  
 Quantity: [Redacted] Make: [Redacted] Receipt Provided to Owner:   
 Where Found: [Redacted] Owner: [Redacted]

Interpreting Interpreter: [Redacted] Email, Phone, or Contact Info: [Redacted]

Reporting Soldier's Name: [Redacted] Submitting Officer's Name: [Redacted]  
 Last: First MI: [Redacted] Last: First MI: [Redacted]  
 Signature: [Redacted] Email: [Redacted]  
 Date: *3 18 103* Unit Phone: [Redacted]

b6-2  
b7C-2

b6-2  
b7C-2



EVIDENCE/PROPERTY CUSTODY DOCUMENT

For use of this form see AR 190-45 and AR 195-6; the proponent agency is US Army Criminal Investigation Command

SECURITY NUMBER

035 28088

CRD REPORT/CID ROI NUMBER

RECEIVING ACTIVITY

LOCATION

7/4 mp Co CID

CAMP WARHORSE

NAME, GRADE AND TITLE OF PERSON FROM WHOM RECEIVED

ADDRESS (Include Zip Code)

OWNER

OTHER

LOCATION FROM WHERE OBTAINED

REASON OBTAINED

TIME/DATE OBTAINED

B 3/8 WAF

Personal Property

0308803  
0013

ITEM NO. QUANTITY

DESCRIPTION OF ARTICLES

(Include model, serial number, condition and unusual marks or scratches)

1	1	250 Diner
2	1	100 Diner
3	3	ID CARDS
4	1	white undershirt

/// Nothing follows ///

CHAIN OF CUSTODY

ITEM NO.	DATE	RELEASED BY	RECEIVED BY	PURPOSE OF CHANGE OF CUSTODY
	0308803	SIGNATURE B 3/8 mp	SIGNATURE [REDACTED]	Personal Property
		NAME, GRADE OR TITLE	NAME, GRADE OR TITLE	
		SIGNATURE	SIGNATURE	
		NAME, GRADE OR TITLE	NAME, GRADE OR TITLE	
		SIGNATURE	SIGNATURE	
		NAME, GRADE OR TITLE	NAME, GRADE OR TITLE	
		SIGNATURE	SIGNATURE	
		NAME, GRADE OR TITLE	NAME, GRADE OR TITLE	
		SIGNATURE	SIGNATURE	
		NAME, GRADE OR TITLE	NAME, GRADE OR TITLE	

DA FORM 4137, 1 JUL 76

Replaces DA FORM 4137, 1 Aug 72 and DA FORM 4137-R, Privacy Act Statement, 26 Sep 75 Which are Obsolete

USAPPC 11 OF

DOCUMENT NUMBER

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

PRIVACY ACT STATEMENT

AUTHORITY: Title 5 USC Section 552, Title 5 USC Section 295-61, E.O. 9397 dated November 22, 1943 (SSN).  
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be securely  
ROUTINE USES: Your or social security number is used as an additional/alternate means of identification to facilitate filing and routing.  
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION CAMP WARHORSE, IR/RAQ	2. DATE (YYYYMMDD) 2003/008/03	3. TIME 1645	4. FILE NUMBER
5. LAST NAME FIRST NAME MIDDLE NAME [REDACTED] b6-4	6. SSNN [REDACTED]	7. GRADE [REDACTED]	
8. ORGANIZATION OR ADDRESS [REDACTED] b6-4 [REDACTED] b7C-4			
9. [REDACTED] b6-4 [REDACTED] b7C-4			

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH

Detainees numbers [REDACTED] and [REDACTED] were all detained by 625 IN (TF II-67) during a raid on suspected Ba'ath Party members and suspects involved in mortar attacks of Camps Warhorse and Scumman. All weapons were turned in to the Camp Warhorse Detention Center. All AK-47's and pistols will be subsequently turned over to the Baqubah Police Station where they will be distributed to various police stations in the Diyala Province. All larger weapons and explosives will be released to engineers for final disposition. //END OF STATEMENT//

b7C-4  
b6-4

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 1
-------------	---	-------------

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_  
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

Exhibit B

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 Warehouse, IRAQ
2. DATE: 2003/08/14
3. TIME: 1053
4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME
6. SSN
7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS

9. I, [redacted], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH
I was at E-MED Aid station they received a call saying a Detainee was vomiting so I came to check it out. When I arrived he was not vomiting at the time, but had some fluid coming out of his nose, I was going to start an I.V. but I decided to go back to the Aid station to ask what to do. I was told to give him an I.V. If his vitals were not outrageous and return to tell [redacted] what the situation was and she told me if I think he was too serious to bring him down. I go back to the Detention facility to do so and the guy went from breathing and having a pulse to not having anything. [redacted] started CPR and I returned to get a vehicle to pick him up with. They sent a e-vac team in a m998 to pick him up. when they arrived they reassessed his vitals and still nothing so we stopped CPR put him on a litter and took him to the Aid station.

Energy
b6-4
b7c-4

/// END OF STATEMENT ///

10. EXHIBIT
11. INITIALS OF PERSON MAKING STATEMENT
PAGE 1 OF 3 PAGES

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.

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

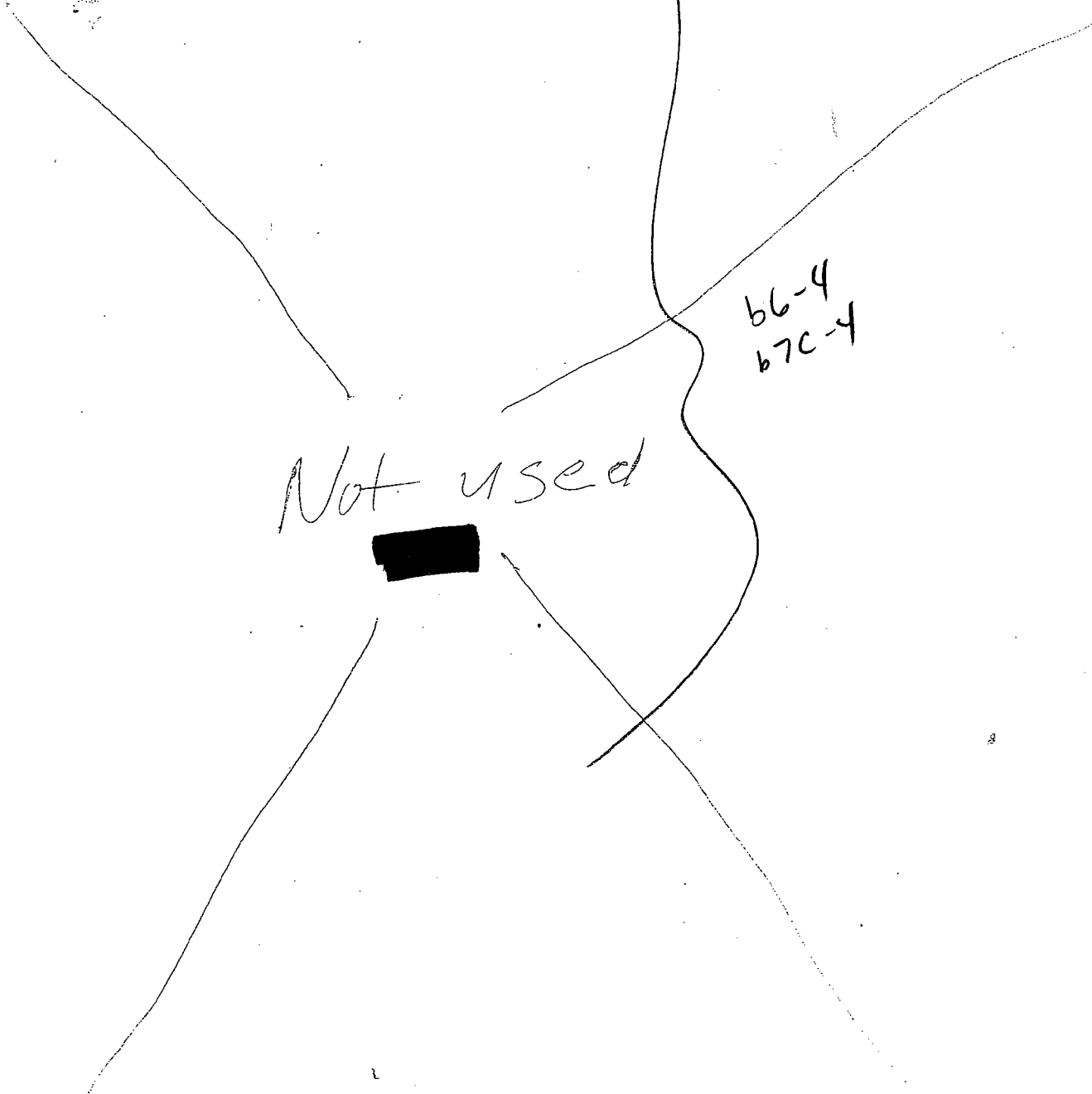
STATEMENT OF



TAKEN AT

Camp Warhorse DATED 2003/08/14

9. STATEMENT (Continued)



Not used



b6-4  
b7C-4

6319

STATEMENT OF [REDACTED]

TAKEN AT Camp Werhorse DATED 2003/08/14

9. STATEMENT (Continued)

Not used

b6-4  
b7C-4

AFFIDAVIT

I, [REDACTED], 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 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:

b6-4  
b7C-4

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 14<sup>th</sup> day of August, 2003 at

[REDACTED]  
(Signature of Person Administering Oath)

[REDACTED]  
(Typed Name of Person Administering Oath)

[REDACTED]  
(Authority To Administer Oaths)

b6-2

INITIALS OF PERSON MAKING STATEMENT [REDACTED]

PAGE 3 OF 3 PAGES

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

Exhibit C

LOCATION <i>Camp War Horse</i>	DATE <i>15 August 03</i>	TIME <i>13:30</i>	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]		GRADE/STATUS [REDACTED]
ORGANIZATION OR ADDRESS [REDACTED]			

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

On 13 August 03 I went to the Camp Warhorses EPW center for the purpose of health screening the detainees. I was accompanied by two specialists from the 1952nd. Upon arrival we received a sheet of paper with the new detainees numbers on it, with columns for BP & pulse recording and treatments if needed. As I was walking by the 2 large holding areas for detainees, I noticed a civilian detainee lying outside on the sidewalk. He was speaking to the MP's. I asked what was wrong with him, the response from the MP was he felt ill the prior night. I said I would like to see him after the new detainees.

b6-4  
b7C-4

With the help of an interpreter who was a detainee we saw and evaluated the new detainees, BP & P were checked and recorded on the sheet provided. I saw one young man in extreme distress - complaining of rectal pain, I deferred an exam and arranged for an ambulance to take him to ECHO MED for further exam. The last detainee I evaluated was the one lying on the sidewalk when I came in. He walked over and sat in a chair without assistance. Through the interpreter I asked how he was feeling, the response was "my nose hurts, it is dry, and sometimes blood comes out" - he kept gesturing to his nose. I said is there anything else bothering you? He again gestured to his nose and said it is hot and I can't sleep - through the

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF <u>2</u> PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_ CONTINUED."  
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE \_\_\_\_\_ OF \_\_\_\_\_ PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.



interpreter. I checked his BPs P. - I do not recall exactly, but it was around 119/70-88. Heart rate regular. The numbers were recorded on the daily record. I left instructions for this man to receive an extra water bottle and not go outside in the sun. This man did not appear to be in acute distress at the moment I was talking to him. He looked to be about 55 to 65 yrs of age and well nourished. His skin was warm and dry. There were no obvious signs of injury or trauma. I told the MP's if he were to get acutely ill, call for the ambulance to take him to ECMO med right away.

Nothing further

b6-4  
b7C-4

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. 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)

b6-4  
b7C-4

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 5<sup>th</sup> day of August 2003 at 1430

ORGANIZATION OR ADDRESS

[REDACTED]  
(Signature of Person Administering Oath)

b6-2

[REDACTED]  
(Typed Name of Person Administering Oath)

ORGANIZATION OR ADDRESS

[REDACTED]  
(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

[REDACTED] b6-4  
b7C-4

EXHIBIT D  
b6-4  
b7c-4

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION Camp Warhorse	DATE 20030813	TIME 1324	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]		GRADE/STATUS [REDACTED]
ORGANIZATION OR ADDRESS [REDACTED]			

b6-4  
b7c-4

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

b6-4  
b7c-4

On 20030813, at midday, prisoner #0352808 began complaining that he was ill. The previous day he had received an IV from the medics and had also complained to them earlier the day of the 13th, so we decided to let him out. ~~At 1600 the prisoner was still outside of his cell.~~ At 1600 radio watch in the front of the collection facility and at 1600 someone informed me that he still was ill, which I thought was strange, since he had been given more water and shade. I went back to see what was going on, and he was lying back to see fatigued. I returned to the front to listen to the radio again. At about 1640, someone told me that the prisoner had vomitted and possibly defecated. I went back again to check on him, and there was a puddle next to his head and a stain where his buttocks were. Not knowing what to make of it, we informed our medic, who went to Echo Med to try to get the doctors to look at the prisoner. I once again returned to the front to monitor the radio. About 20 minutes passed and then someone ran and told me the prisoner had stopped breathing and was unconscious.

b6-4  
b7c-4

b6-4  
b7c-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF [REDACTED] TAKEN AT [REDACTED] DATED [REDACTED] CONTINUED."  
 THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE [REDACTED] OF [REDACTED] PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE

STATEMENT (Continued)

At the same time, [redacted] returned and said he was told to evaluate the prisoner before the doctors could look at him. Once we told [redacted] what happened, he and [redacted] immediately drove to Echo Med to inform them the prisoner was unconscious and not breathing. I then went back to check on what was happening. The prisoner's heart had no pulse and Sgt [redacted] had begun CPR. I noticed that air was barely going in while he exhaled into the CPR mask, so I plugged the prisoner's nose and held the mask down firmly. After a couple of minutes, the emergency personnel arrived and took the prisoner to the aid station. I returned to my post.

// End of Statement //

b6-4  
b7C-4

b6-4  
b7C-4

AFFIDAVIT

I, [redacted], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. 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]  
(Signature of Person Making Statement)

b6-4  
b7C-4

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16<sup>th</sup> day of August 19 2003 at [redacted]

[redacted signature]  
(Signature of Person Administering Oath)

[redacted name]  
(Typed Name of Person Administering Oath)

[redacted authority]  
(Authority To Administer Oaths)

b6-2

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

[redacted initials] b6-4 b7C-4

PAGE 2 OF 2 PAGES

6324  
v2.00

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION FCP Washorse	DATE 2007 0916	TIME 1500	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]	GRADE/STATUS [REDACTED]	
ORGANIZATION OR ADDRESS [REDACTED]			

I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH

[REDACTED] prisoner # [REDACTED] started the morning off by complaining of chest pains. We layed him outside on a blanket and gave him another full bottle of water. Our platoon's medic took care of # [REDACTED]. The prisoner then stated he wanted milk, and our medic, [REDACTED] gave him a dairy shake. After resting for about 30 min, prisoner # [REDACTED] walked back to his cell. Later on that evening, prisoner # [REDACTED] complained again of the same symptoms of earlier. We brought him outside again, layed him down, and gave him another bottle of extra water. Once the prisoner was resting, I went back to work in the front of the FCP. About 30 minutes later, I was told by the [REDACTED] to drive our medic to Echo medical facility. Once there, [REDACTED] went to the facility, and I stayed back in the Humvee. After about 5-10 minutes later, [REDACTED] returned and I drove back to the FCP. Upon arrival we were told that prisoner # [REDACTED] did not have a pulse, and was unconcious. I then drove in a hurry with [REDACTED] back to the Echo Medical Facility. We both told the medics and they came down in a Humvee to pick up the prisoner. Upon arrival the medics determined that he indeed did not have a pulse, and evacuated prisoner # [REDACTED] to their medical facility. This concludes my Sworn statement. END of statement

b6-4  
b7C-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_ CONTINUED." THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE \_\_\_\_\_ OF \_\_\_\_\_ PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

b(6), b(3)

STATEMENT (Continued)

NOT  
3AT

CS ET

b6-4  
b7C-4

b6-4  
b7C-4

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED]  
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16th day of August, 2003 at 154K

ORGANIZATION OR ADDRESS

[REDACTED]  
(Signature of Person Administering Oath)

b6-2

ORGANIZATION OR ADDRESS

[REDACTED]  
(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

b6-4  
b7C-2

INITIALS OF PERSON MAKING STATEMENT

[REDACTED]

EXHIBIT F

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION <i>Camp Warhorse, Iraq</i>	DATE <i>2003/08/16</i>	TIME <i>(1400)</i>	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]	GRADE/STATUS [REDACTED]	
ORGANIZATION OR ADDRESS [REDACTED] Fort Hood, TX 76544			

b6-4  
b7c-4

... WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

The first time I had any dealings with the detainee in question was on the night of 12 Aug 03, at approximately 2100 hrs. The detainee was brought outside of his cell. He was, apparently overheated. I gave the detainee more water to drink and splash on him to cool him down. He was outside approximately 20 to 30 minutes, before he was brought back inside. The reason he was brought back in was because of a mortar attack on Camp Warhorse. The following morning at approximately 0900, the detainee was brought outside of his cell again, for not feeling well. I checked on him, he seemed to be OK, maybe just a little weak, and overheated. When the PA arrived, a female [REDACTED], she examined him. She stated that his Blood Pressure was a little low, but not at a dangerous level, and just needed to be sure and eat and drink. The detainee stated that he had a stomach problem and he couldn't eat meats and wanted milk. The PA advised us to give him two dairy shakes in the morning and two in the evening along with his normal meal. At approximately 1600 hrs, the detainee was brought out of his cell again, he appeared to be overheated. He was complaining of being hot. I gave him more water and told two other detainees that were helping him to sprinkle water over his body to cool him down. I monitored him for a few minutes, and then went back to the front of the Facility. About 15-20 minutes later I was notified by one of the guards that he had begun vomiting. I went back to check on him again and his breathing was a little bit labored, his pulse still felt good. I then went back to my truck and called the Platoon TOC to get [REDACTED] to come down and help out. I was unable to make contact

b6-4  
b7c-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF <u>2</u> PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_ CONTINUED."  
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE \_\_\_\_\_ OF \_\_\_\_\_ PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

STATEMENT (Continued)

with anyone at the platoon TOC, so I called Echo Med direct, requesting medical assistance for a detainee with labored breathing and was vomiting. About five minutes after that [redacted] showed up to examine the detainee. [redacted] noticed a fluid coming out his nose, and was concerned about that. He also checked his pulse. [redacted] then left to go to the Aid Station to get further guidance. About five minutes after [redacted] left, the detainee stopped breathing. I checked for a pulse, there was nothing. I then ran to [redacted] and bag to get a face shield and returned. I started CPR, checked for the rise of hip chest, and then gave five compressions. [redacted] returned, realized I was giving CPR, and immediately returned to the Aid Station to get an Ambulance and Medical Support. The Medics and Ambulance arrived approximately 5 minutes after I started CPR. Once they arrived, the medic asked me how long I had been doing CPR. She instructed me to stop and get him on the stretcher. I helped put the stretcher on the truck and they left. // END OF STATEMENT //

b6-4  
b7C-4

b6-4  
b7C-4

AFFIDAVIT

I, [redacted], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. 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.

(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 15<sup>th</sup> day of August, 2003 at 1500

ORGANIZATION OR ADDRESS

(Signature of Person Administering Oath)

(Typed Name of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 2 PAGES

EXHIBIT 6

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION CAMP Warhorse	DATE 16 Aug 03	TIME 1115	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]	GRADE/STATUS [REDACTED]	
ORGANIZATION OR ADDRESS [REDACTED]			

b6-4  
b7c-4

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 13 Aug 03 at 1700 hrs the Ambulance brought an Iraqi detainee litter patient. When the patient arrived he was not breathing and had no pulse. The Drs began working on his airway putting in an ET tube while [REDACTED] bagged the patient. [REDACTED] began chest compressions while myself and another medic began IV access. The patient was hooked up to the propaq which was reading no pulse and no heart rhythm. [REDACTED] turned on the defib and charged and began shocking the patient, in between [REDACTED] and [REDACTED] continued CPR. The Drs pushed Atropine and epinephrine. At this time I began chest compressions and [REDACTED] began bagging. Someone brought over the ultrasound machine and the Drs looked for any signs of heart movement. There still was none present. [REDACTED] took over Defib and began her shocks. Still no heart beat. At this time [REDACTED] took over Defib, [REDACTED] began compressions. [REDACTED] did an axillary temp <sup>104</sup>. And [REDACTED] continued using defib while [REDACTED] continued compressions and [REDACTED] bagged. At this time it had been about 20 min. The Drs checked again still no pulse present and the patient was not breathing on his own. The time of death was called at 1719 [REDACTED] did a rectal

b6-4  
b7c-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF [REDACTED] TAKEN AT [REDACTED] DATED [REDACTED] CONTINUED." THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE [REDACTED] OF [REDACTED] PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

6329



STATEMENT (Continued):

temp which was 102.

nothing further

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. 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] b6-4 b7C-4  
(Signature of Person Making Statement)

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16th day of August, 2003 at 1230

[REDACTED] b6-2  
(Signature of Person Administering Oath)

[REDACTED]  
(Typed Name of Person Administering Oath)

[REDACTED]  
(Authority To Administer Oaths)

WITNESSES:

[REDACTED]  
ORGANIZATION OR ADDRESS

[REDACTED]  
ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT [REDACTED]

PAGE 2 OF 2 PAGES

6330  
LEAF 72.00

EXHIBIT #

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION Camp Warhorse, Iraq	DATE 16 Aug 03	TIME 1204	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]	GRADE/STATUS [REDACTED] b6-4 [REDACTED] b7C-4	
ORGANIZATION OR ADDRESS [REDACTED]			

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

On 13 Aug 03, while working in the aid station, I was informed that a detainee at the EPW detention center was discovered unconscious and not breathing. Shortly thereafter, he arrived in the aid station. I received a report that he had "passed out" and found to be without a pulse or spontaneous respirations, so CPR had been in progress before his arrival.

On arrival at the aid station, the patient was apneic and pulseless. He was immediately placed on monitors, IV's established, CPR continued and intubated. When he was found to be in pulseless V-tach he was defibrillated in the usual manner and medications were administered (epinephrine, atropine, lidocaine, bicarbonate). CPR was continued throughout the code resuscitation. Two cardiac ultrasounds revealed no cardiac motion. The patient arrived at 1700. At 1719 he had no pulse, no spontaneous respirations, no cardiac motion on ultrasound and an agonal rhythm. He was pronounced dead. Further details may be found in the SF600.

As the battalion surgeon for E/204 FSB I participate in the daily medical care of the detainees. My colleagues and I visit the detention center every morning. We medically screen all new detainees and medically evaluate all detainees requesting medical care. Patients are treated either at the detention facility or transported to the aid station, as appropriate. We are available on a 24 hour basis for detainee medical care.

b6-4 b7C-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_ CONTINUED." THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE \_\_\_\_\_ OF \_\_\_\_\_ PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

6331

STATEMENT (Continued)

I believe conditions at the detention center are medically adequate. Food and water is provided in a sufficient amount. Medical care is timely and appropriate. Every possible effort is made to keep the detainees from becoming a heat casualty. The only recommendation that I would make from a medical standpoint, would be to install fans or another cooling device at the detention center. - "END OF STATEMENT" -

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE \_\_\_\_\_. 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] (Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 10<sup>th</sup> day of August, 2003 at

\_\_\_\_\_  
\_\_\_\_\_  
ORGANIZATION OR ADDRESS

[REDACTED SIGNATURE] (Signature of Person Administering Oath)

\_\_\_\_\_  
\_\_\_\_\_  
ORGANIZATION OR ADDRESS

[REDACTED NAME] (Typed Name of Person Administering Oath)

\_\_\_\_\_  
ORGANIZATION OR ADDRESS

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT [REDACTED]

PAGE 2 OF 2 PAGES

USAPPC V2.00

b6-4  
b7C-4

Exhibit I

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION	DATE 16 Aug 03	TIME 1100	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME	SOCIAL SECURITY NUMBER	GRADE/STATUS	
ORGANIZATION OR ADDRESS			

I, \_\_\_\_\_, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 15 Aug 03 at approx 1645, I was standing outside the aid station when \_\_\_\_\_ pulled up in an MP vehicle with another soldier, he ran up to me and asked if I could send the Ambulance crew over to the detainee camp they had a guy down. I rounded up a team from Ambulance Plt to go over with him. I then came inside the aid station to inform the doctors of the situation. Approx 10-7 mins later the Ambulance crew pulled up and \_\_\_\_\_ was saying that the guy had been down for approx 5 min and the MP's were doing CPR when they arrived on site. We rushed the guy in and proceeded to assess the situation. We exposed his chest \_\_\_\_\_ checked for a pulse and told us to begin CPR, I began chest compressions and \_\_\_\_\_ set up to begin breathing for him. After we began CPR, I yelled for someone to go get some more medics we needed more help. More medics came in and started to help. They started IV's and began to push cardiac meds. As things progressed \_\_\_\_\_ + I rotated out from our initial work positions to be replaced by other soldiers (medics) everyone kept working. The patient had been shocked three times with still to progress or improvement. He had been

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT _____	PAGE 1 OF 2 PAGES
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STATEMENT (Continued)

b6-4  
b7c-4

intubated and had received several lifesaving drugs and interventions. When someone asked for a rectal temp it was noticed that his bowels had moved. At that time [redacted] told everyone to pause what they were doing while he checked for a heartbeat and spontaneous breathing. When was present, he asked for the time, I read the time as 1719 and he called the patients time of death. We began to clean up and cover the patient.

This concludes my statement.

Nothing follows

AFFIDAVIT

I, [redacted], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE [redacted] AND ENDS ON PAGE [redacted]. 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.

b6-4  
b7c-4

[redacted]  
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16<sup>th</sup> day of August, 2003 at [redacted]

b6-4  
b7c-4

b6-2

[redacted]  
(Signature of Person Administering Oath)

[redacted]  
(Typed Name of Person Administering Oath)

[redacted]  
(Authority To Administer Oaths)

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 2 PAGES

6334  
HSAPPC V2.00

EXHIBIT J

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION CAMP WARTORSE	DATE 16 AUG 03	TIME 1040 Hrs	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME	SOCIAL SECURITY NUMBER	GRADE/STATUS	
ORGANIZATION OR ADDRESS			

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

On Wednesday, 13 Aug 03 I was called to cover ambulance duty for a missing soldier at which point I was informed to head over to the POW/detainee center to pick-up a patient with no pulse by my platoon [REDACTED]. I picked up my kevlar and weapon and put on my DCU jacket and headed over to the "Ambulance" which was first-up, an M997 cargo Humvee [REDACTED] and [REDACTED] were already in it and I consequently got in the back. The ride to the detainee center took approximately one minute. I got out of the truck and headed for the detainee cells. This place is familiar. [REDACTED] was already there. I assumed she had already done an assessment because she asked me to load the patient on a litter that was already there. Some MPs and some detainees were there and assisted us with the [REDACTED] <sup>this</sup>. I grabbed hold of one side of the litter and we all headed out toward the vehicle. [REDACTED] drove there and did not get out of the vehicle. I rode in the back of the vehicle with the patient. I "Bagged" the patient with a BVM (Bag-Valve-mask) apparatus under instruction from [REDACTED]. I remember giving him approximately 4 "breaths" before we got off ~~to~~ to the aid station. The "Bagging" ceased and I helped off-load the patient and rush him into the aid-station.

b6-4  
b7c-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_ CONTINUED."  
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where we placed him on the litter-stands that were set-up and ready to receive him. Till this point it was still I, [redacted] and [redacted]. There were enough medics in the aid-station so I left and went back to the Humvee vehicle to pick-up my weapon. I was not further involved in the care of this patient.

b6-4  
b7c-4

nothing further

AFFIDAVIT

I, [redacted], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. 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.

b6-4  
b7c-4

[redacted]  
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16<sup>th</sup> day of August, 192003 at 1240

b6-4  
b7c-4

[redacted]  
(Signature of Person Administering Oath)

b6-2

[redacted]  
(Typed Name of Person Administering Oath)

[redacted]  
(Authority To Administer Oaths)

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

ECO 204 FSR

INITIALS OF PERSON MAKING STATEMENT [redacted]

EXHIBIT K

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is ODCSOPS

LOCATION Eco Med / FOB Warhorse Iraq	DATE 16 Aug 03	TIME 1100	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]		GRADE/STATUS [REDACTED]
ORGANIZATION OR ADDRESS [REDACTED]			

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

On or about the 13th of Aug. 03, I was sitting out side of one of the sleep tents trying to stay out of the sun. [REDACTED] came by and said [REDACTED] told us someone needed to go pick up a Iraqi detainee at the detention center. I told [REDACTED] to grab his gear and we'll go. I ran out to the non-standard evac. vehicle, threw a litter in the back & hopped in the drivers seat. [REDACTED] ask me if I wanted her to come along. I said o.k. and she jumped in the passenger seat. [REDACTED] jumped in the back and we left. While enroute [REDACTED] told me that one of the m.p.'s, who came to get us, said the patient had no pulse. [REDACTED] and myself decide that her and [REDACTED] would go check out the patient while I preposition the vehicle for a quick exit. Once I parked the vehicle I stepped out and saw that [REDACTED] and others had placed the patient on a litter and were carrying him to the vehicle. [REDACTED] told me he had no pulse while we loaded him on the vehicle. We jumped in the vehicle and headed towards Eco Med. I had [REDACTED] start ventilations with the BVM (bag valve mask). Once we arrived at Eco Med, the three of us dismounted and carried the patient inside the Aid Station. Inside the aid station a litter stand had already been cleared and [REDACTED] & [REDACTED] were standing by. [REDACTED] started CPR while I provided respirations with the BVM. [REDACTED] Intubated the patient, several medics help ed start two I.V.'s. The patient had a shockable heart rhythm and recieved several shocks from the defibulator. The doctors pushed a couple of cardiac drugs and monitors the effectiveness of the CPR. After 12-15 minutes, the doctors called the code and time of death. After wards I left the aid station

b6-4  
b7c-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF [REDACTED] TAKEN AT [REDACTED] DATED [REDACTED] CONTINUED." THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE [REDACTED] OF [REDACTED] PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.



STATEMENT (Continued)

to check that the evac. vehicle was refitted to be on standby. I then returned to the rest area outside the tent. This concludes my statement.

Nothing Follows

[Redacted]

b6-4  
b7C-4

AFFIDAVIT

I, [Redacted], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. 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] b6-4 b7C-4  
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 16<sup>th</sup> day of August, 19 2003 at 1230

[Redacted Signature] b6-2  
(Signature of Person Administering Oath)

[Redacted Name]  
(Typed Name of Person Administering Oath)

[Redacted Authority]  
(Authority To Administer Oaths)

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT [Redacted]

EDICAL RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
3 Aug 03 7:00 arrived	Pt in V/A EMS - apparent cardiopulmonary arrest. On arrival:
	A - G-gag @ pooled secretions Procedure Ord ETT
10/10/22	B - G-spom resp (BVM initiated) Indico: resp arrest
8/9/23	C - G-pulse (CPR initiated) Proc: 3-0 Mac - good
10/29	D - GCS 3 Pupils 3mm + fixed ETT passed easily
	②bs ③ secured @ teeth
3 PH	<p>Pt was moved placed on monitors, CPR initiated, IUX 2 placed</p> <p>Airway secured - 7-0 ETT 5 cm protrusion. BVA - (13) bs.</p> <p>Monitor showed VTach (G-pulse) so 1:16 200-300-310</p> <p>Epi 1mg / atropine 1mg given IV.</p> <p>CPR cont'd Hum. Repeatd defib @ 360 performed.</p> <p>Lidocaine 100mg IV, Amp bicarb IV</p> <p>Fem stick for blood done + E-sint performed. Ax Temp 104°</p> <p>Cardiac v/s x 2 performed - G cardiac motion.</p> <p>At 1719 pt was in agonal rhythm v/s showed G cardiac activity. G pulse. G-spom resp. Pupils fixed + dilated.</p> <p>Code called @ 1719.</p> <p>Presumed cause of death cardiopulmonary arrest.</p>

b6-4  
b7c-4

SPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	
PATIENT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade.)		REGISTER NO.	WARD NO.

CHRONOLOGICAL RECORD OF MEDICAL CARE  
 Medical Record  
 STANDARD FORM 600 (REV. 6-97)  
 Prescribed by GSA/ICMR  
 FIRM (41 CFR) 201-9.202-1  
 USAPA V2.00

EPW  
#0352808

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