

DEPARTMENT OF THE ARMY 38th MILITARY POLICE (CID) 22th MILITARY POLICE BATTALION (CID) APO AE 09342

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CIRF-CHD

2 June 2004

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: CID REPORT OF INVESTIGATION - FINAL (C) - 0137-04-CID899-81702 - 5C1J/9G2B/9G2E

DATES/TIMES/LOCATIONS OF OCCURRENCES:

1. 7 May 2004 / 0845 - 7 May 2004 / 1030; BETWEEN CAMP WAR EAGLE AND CAMP CUERVO, BAGHDAD, IRAQ

EAGLE AND CAMIF COLITYO, DACIDAD, 11414	
DATE/TIME REPORTED: 9 May 2004, 1100	67e-1,66-
INVESTIGATED BY: SA	■ 67
SUBJECT: 1.	6 62 67e-5,66-5
M; BLACK; A CO, 2/5 CAV, 1CD, CAMP WAR EAGLE,	
BAGHDAD, IRAQ; (FT HOOD, TX) [AGGRAVATED ASSAULT]	610-4,66-
VICTIM: 1. ; M; OTHER; HAI BETOOL, BAGHDAD, IRAQ; (NFI)	
[AGGRAVATED ASSAULT]	157E-4,66
2. M; OTHER; HAI BETOOL, BAGHDAD, IRAQ;	
(NFI)[AGGRAVATED ASSAULT]	
On 9 May 04, MAJ War Eagle, Baghdad, Iraq reported two detainees rece	c-3,66-3
On 9 May 04, MAJ Brigade (BDE), Camp War Eagle, Baghdad, Iraq reported two detainees rece	ived
injuries while being transported from Camp War Eagle to Camp Cuervo.	1-5,66-5
Investigation established probable cause to believe 301	
guarding Mr. Sand Mr.	
Cuervo, Iraq. Both Mr. and Mr. and Mr. were blindfolded and had hands restrained behind their backs by flexi-cuffs. While enroute to Camp	their 67C-4,66- &
	- !

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DODDOACID-005133

b76-5,66-5

Cuervo, SGT white and kicked both Mr. and Mr.

STATUTES:

Article 128 UCMJ: Aggravated Assault

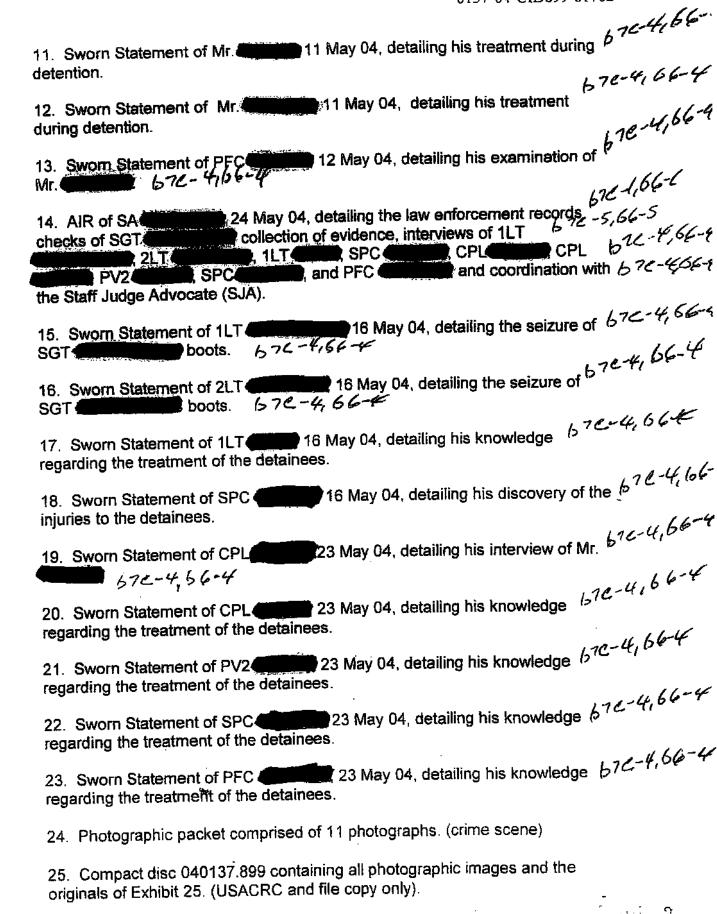
EXHIBITS/SUBSTANTIATION:

ATTACHED:

67C-1.66-1

- 2. Copies of 15-6 documents provided by MAJESSES 676-4
- 3. Sworn Statement of MSG 9 May 04, detailing his knowledge of the 57c-4,66-4 events of 7 May 04.
- 4. Sworn Statement of SGT 9 May 04, detailing his knowledge of the events of 7 May 04.
- 5. Waiver Certificate of SGT Manual 9 May 04. 67C-5,66-5
- 6. Sworn Statement of SPC May 04, 9 May 04, detailing his knowledge of the events of 7 May 04.
- 7. Sworn Statement of SFC 11 May 04, detailing his actions on 7 May 67C-1466-
- 8. Sworn Statement of 1LT May 04, detailing his examination of the detainees.
- 9. Sworn Statement of SPC 11 May 04, detailing his discovery of the injuries to the detainees.
- 10. Sworn Statement of SGT 11 May 04, detailing her interview of Mr.

· 6



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26. Crime Lab Examination Request, 18 May 04, requesting that the boots of be examined to determine if they could be identified as having SGT caused the marks on the detainees. (USACRC and file copy only)

676-4

27. DA Form 4137, Evidence/Property Custody Document, vouchers (VO) 401-04, 16 May 04. (USACRC and file copy only)

NOT ATTACHED:

Retained in the Evidence Depository, 22nd MP BN, Baghdad, Iraq:

28. Boots, size 12R (SGT)

676-4,66-4

29. Boots, size 14R (SGT)

30. Boots, size 10.5 R (SGT)

Boots, 12.5 R (SGT €

The originals of Exhibits 1, 3 through 26 are maintained in the files of this office pending adjudication. The originals of Exhibit 2 are maintained in the files of HHC, 1-12 CAV, 1CD, Camp War Eagle, Iraq. The original of Exhibit 27 is maintained in the files of U.S. Army Criminal Investigation Laboratory, Forrest Park, GA 30297. The original of Exhibit 28 is maintained in the files of the Evidence Depository, 22nd MP BN CID, Baghdad, Iraq.

STATUS: This is a Final (C) Report. This investigation is being terminated under the provisions of CIDR 195-1, Chapter 4-17(4). The supported Staff Judge Advocate is of the opinion that sufficient admissible evidence is available to prosecute the subject for the offense, that additional investigation would produce only cumulative and unneeded evidence, and that the identification of additional subjects or offenses is unlikely. Commander's Report of Disciplinary Action Taken (DA Form 4833) is pending.

LEADS REMAINING: Receipt of laboratory examination and interviews of CPT 62466

Report Prepared By:

Report Approved By:





DISTRIBUTION:

1 - DIR, USACRC (original), Fort Belvoir, VA 22060

1 - THRU: CDR, 2/5 CAV, 1CD, Camp War Eagle, Baghdad, Iraq

TO: CDR, A Co, 2/5 CAV, 1CD, Camp War Eagle, Baghdad, Iraq 1 - THRU: CDR, 22nd MP Bn (CID), APO AE 09342 CDR, 3rd MP Group (CID), Fort Gillem, GA 30050

67e-3,66-3 TO: CDR, USACIDC; ATTN; CIOP-ZA, Ft Belvoir, VA 22060

1 - SJA (ATTN: MAJ , 1CD, APO AE 09342 (email)

1 - PMO (ATTN: MAJ , 1CD, APO AE 09342 (email)

1 - File

AGENTS INVESTIGATION REPORT 0137-04-CID899-81702	
CID Regulation 195-1 PAGE 1 OF 3 PAGES 466	4
DETAILS	
BASIS FOR INVESTIGATION: About 1100, 09 May 04, this office was notified by MAJ Headquarters, 1-12 Calvary, 1st Brigade (BDE), 1st Calvary Division (CD), Camp War Eagle, Baghdad, Iraq that two detainees received injuries while being transported from Camp War Eagle to Camp	
Cuervo, Baghdad, Iraq.	61
About 1330, 09 May 04, SA minimum interviewed MAJ who related he conducted an AR 15-6 676-5	
anvestigation into the incatest and related that it appeared the two detainees were assented by SG I	
A Co, 2/5 Calvary, 1st CD, Camp War Eagle, Baghdad, Iraq while he was guarding them in transit from Camp War Eagle to Camp Cuervo. MAJ provided a copy of the 15-6	غ م
investigation, which also contained statements from the detainees.	46
b76-1,66-1 576-4 66-4	
About 1535, 09 May 04, SA Million interviewed MSG Million Company,	٠.
1st CD, Camp War Eagle, Baghdad, Iraq who released the detainees to SGT and for transport. MSG	p-4
provided a sworn statement detailing the events that happened on 07 May 04. (See Sworn Statement	
for details) 676-4,66-4	
About 1615, 09 May 04, SA Company interviewed SGT Company Comp	
Artillery (FA), Camp War Eagle, Baghdad, Iraq who was the driver of the truck. SGT	5
sworn statement detailing the eyents that happened on 07 May 04. (See Sworn Statement for details)	;-4
676-166-1 676-5166-5	,
About 1640, 09 May 04, SA and advised SGT and sales of his legal rights which he waived and was 514	51,
interview admir 1700 when he invoked his right to compet and the interview was stopped. By I	6.
related that he was detailed out the morning of 07 May 04 to guard one detainee. When he arrived at the	51
detention facility there were two detainees instead of one, he related he did not like that. SGT	þ
related both individuals had their hands flexi-cuffed behind them and they both had blind folds over their eyes. SGT The second related be climbed in the back of the truck with them and they left enroute to Camp Cuervo,	1C-
Baghdad, Iraq. SGT related before leaving he was briefed by MSG not to let them talk/ye	, b
and the standard will the like the standard of	-
distribution the community of the second	
older man he was guarding fell off of the bench seat, SGT the bench seat, seather the related he tried to help the older the property of the bench seat, seather the bench sea	₹ %
mon no when he ten valuenthis mach the oxick of his lea, he taen kicked dackmatos, he telated be struck the	
younger one but he did not know where. SGT related he was afraid of the two detainees. He back	7,06
related they arrived to Camp Cuervo and offloaded the detainees to the holding facility. When confronted that	
the injuries were not consistent with his account of what happened and asked if he had friends that had died	
fighting over here, he answered yes he had and then ended the interview about 1700, 09 May 04, by stating he wanted to speak to an attorney before continuing the interview.	
wanted to speak to all attorney before continuing the lineralew.	
TYPE DAGENTS NAME AND SECRETARIES AND SECRETAR	
TITED AGENT S INCHES AND SECRETARE REMIDER [C] ORGANIZATION	
38 th Military Police Detachment (CID)	
SA Baghdad, Iraq, APO AE 09342	
SIGNATURE FXHIRET	
SIGNATURE 12 MAY 2004 EXHIBIT	

	DOLLER BETTE
AGENT'S INVESTIGATION RE	PORT ROI NUMBER 0137-04-CID898-81702
CID Regulation 195-1	
DETAILS 612	PAGE 2 OF 3PAGES
DETAILS	676 1,064
About 1755, 09 May 04, SA	CPL CBattery, 1-
	ding who was on guard duty the morning of the incident
	of who had duty and he was unsure who had it because
there were several units that share that detail.	ne ne
12-166-1	676-466-4
About 1856, 09 May 04, SA interviewed SPC	A Co, 115 Forward
Support Company (FSC), Camp War Eagle, Baghdad,	
provided a swom statement detailing what happened of	
	rd some noise back there but that was all he seen or heard
(See Sworn Statement for details)	br-4,66-4
67c-1, 66-1	
About 1900, 09 May 04, SA coordinated with	
	, but he would get with the commanders of all three units
that pull guard duty and try to determine who they wer	e over the next couple days.
6761,66-1	-india -Cala Ti Saba II - on all arras a comp
	mination of the Light Medium Tactical Vehicle (LMTV),
which has been used several in	mes since the incident. A crime scene examination was
exposed photographs of the scene utilizing	ras not in the same configuration it was on that day. SA676
1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
About 1130, 10 May 04, SA	SJA, 1 st Brigade, 1CD, Baghdad, Iraq
on all aspects of this case.	bart, I bligate, ICD, bagituat, Itaq
67E-166-1	670-4,66-4
About 1530, 11 May 04, SA minimizer interviewed CPT	OIC, Battalion 100 4
Holding Facility, Camp Cuervo, Baghdad, Iraq who rel	lated that on 07 May 04, SFO
him that a couple detainees that were brought into the h	
678-666-1	b7c-4.66-4
About 1552, 11 May 04, SA	FC , HSB, 1-82
FA, 1CD, Baghdad, Iraq who provided a sworn stateme	ent detailing his knowledge of the incident. Obtained a
photocopy of the DA Form 4137, documenting the dete	ention facility at Camp War Eagle received the personal
items of Mr. and then MSG	gning them over to SGT on 07 May 04. (See 57-4
,	
6x-1,66-1	676-4,66-4
About 1645, 11 May 04, SA	
	etailing his knowledge of the incident and his discovery
of the injuries. (See Sworn Statement for details)	
. 46-1	1
TYPED AGENTS NAME AND SEQUENCE NUMBER 6	ODGANIZATION .
TITED AGENT STRAME AND SECUENCE NUMBER 1	38th Military Police Detachment (CID)
SA	Baghdad, Iraq, APO AE 09342
SIGNATURE	DATE EXHIBIT
	C. 11. 7
4	12 MAY 2004
CID FORM OF FOR OFFICIA	I LIGE ON! V

AGENT'S INVESTIGATION RE	PORT ROI NUMBER 0137-04-CID899-81792
CID Regulation 195-1	PAGE 3 OF 3 PAGES
DETAILS 1-28 H. D.6	LAR-3 166-3
knowledge of the incident. (See Sworn Statement for d 672-1,66-1 About 1810, 11 May 04, SA Facility, Camp Cuervo, Baghdad, Iraq who provided a	A Co, 312 th Military dad, Iraq who provided a sworn statement detailing her etails) bulley CIV, 1 st BDE Holding sworn statement detailing what happened to himself and
his uncle on 07 May 04. (See Sworn Statement for deta	118)
About 1850, 11 May 04, SA interviewed Mr Iraq who provided a sworn statement detailing what has Sworn Statement for details)	ppened to himself and his nephew on 07 May 04. (See
67e-4,66-4	676-4,664
Agent's Comment: Mr. also goes by name.	•
676-166-1	676-4-66-4
672-1,66-1 About 1130, 12 May 04, SA	100 IIIC, 1/12 C/17,
1CD, Camp War Eagle, Baghdad, Iraq who provided a	sworn statement detailing what medical attention he
provided to one of the detainees on 06 May 04 and that	
could see. (See Sworn Statement for details)	
67-1,66-1	170-466-K
	67C-4,66-4
About 1135, 12 May 04, SA	
	r Eagle, Baghdad, Iraq who related he was informed by
the medic that one of the detainees had been seen for	an upset stomach. 1LT related he never
seen the detainees himself.	676-461
//////////////////////////////////////	
TYPED AGENTS NAME AND SEQUENCE NUMBERS 12 1	
TYPED AGENT'S NAME AND SEQUENCE NUMBER ()	
130	ORGANIZATION
- 6 6°	38th Military Police Detachment (CID)
SA	38 th Military Police Detachment (CID) Baghdad, Iraq, APO AE 09342
- 6 6°	38 th Military Police Detachment (CID) Baghdad, Iraq, APO AE 09342
SA	38 th Military Police Detachment (CID) Baghdad, Iraq, APO AE 09342

Page(s)

9-50

Referred to:

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

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

0- 7-04-CID899-817.	<u>_</u>
SWORN STATEMENT For use of this form, see AR 190-45; the proponent agency is Office of The Deputy Chief of Staff for Personnel.	
LOCATION COMP ENT NAME MUDDLE NAME 176 SOCIAL SECURITY NUMBER 576 GRADE/STATUS	7
LAST NAME, FIRST NAME, MIDDLE NAME 176 SOCIAL SECURITY NUMBER 676 GRADE/STATUS MSG /4D	
ORGANIZATION OR ADDRESS HHC 75 Cav, ICD, Bay Ldad, Ivage 66-4	-
I. MSG WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH	-3
ON LT May AT AROUT IL 45 His I was Told & CAT	2
my Supervisor, To Pick up 3 Security Counts ATT The CHOC	
Ruiding To Datain for Suspected working for The Mahat Aung Myself	4
Along WITH IT. who Also work with S-2 of 45 Acked Up	
The o Security Grands and Escarted Them to the Detained facility	
very Goperative. Once we Arrived to the Notance facility bill	1
WE checked Them and Confis could all of their material Belonging	5
I.E. WATCLES WOILET And other ITEMS To Be Improcessed Once	
me finish That we get the Translater To ask them Informat	: -
ON NAME POR DOR TUBE TATOOS, WE THAN FUT The 2 is	
The 2 Solitan Culs To Kep Both from Tolking To Back or the	
her gove them warter and for the hotainess whole they were	.
here. The next Marning Mour. 0845 ON 7 may 04. I Not Proceeding	1
The I betainess and Gove The necessary Paper Work and Their	
ITEMS TO THE ESCORT NOO, ONCE THOTWOOD BONE WE TOOK	
The Distances Out of Their Cells and Wind tolder, Single Appl	~
Them. The Escort Aco along with a other Solder put the	
To Come QUELLE WITH The los Par Convey, End of Statement	
DISA 1000 1010-1, 66-1	
4: MSG 676-4, 66-4	
Q: During the time the two detainees were indetention was it	1
necessary to restrain them at any time by forceful mouns?	
AT NO	İ
Q! Did the detainees resist being moved into the truck?	
A: NO 67E-4,66-4 (rowt)	
EXHIBIT INITIALS OF PERSON MAKING STATEMENT 676-4,66-4 PAGE 1 OF 2 PAGES	
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: 5	·

TATEMENT (Continued) 876-456-45		TIMOED
Q: Did either of the detainers trip extall the truck? At NO. Q: Were either of the detainers have any notice of the features have any notice in the facility? At The Order contiemed was trusted for I have failed their and precise Phils. Q: Did you see any bruises on either of the ATRIDAMI. Q: Did you see any bruises on either of the ATRIDAMI. Which begins on pade 1 and existing you wish to add to this ship of the STATEMENT is true. ATRIDAMI. Which begins on pade 1 and existing you wish to add to this ship of the statement is true. I have mittaled all corrections and new initialed the good statement. Have made this statement freely without hope of benefit on newar and without coercion, unlawful influence, on unlawful inducement. WITNESSES: Subscribed and swe to administer oaths, this at Carry East le. ORGANIZATION OR ADDRESS	rip er fall while being	loaded into
the wikk?		
A:NO.		
Q: Were either of the detainees	combative or belliceran	+3
	9 .	•
	e my noticeable invities	طانيان
in the Cacility?	- sq viceare morres	<u></u>
4: The Order de Thomas was	Viewend C. Nill I	
1		
Did un see any bridge on the	have of the down age ?	
	ter or to be fairles?	
	add on this statement?	
	RAD TO TMOS STATEMENT :	
	FNT// 676-466-4	
777		
inde		
1572-4756-		
	· · · · · · · · · · · · · · · · · · ·	
		•
		-
66	6-4	
- GARAGE	N/T	
I, Carrier V AFFID	, HAVE READ OR HAVE HAD READ TO ME T	ATEMENT
WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERST	AND THE CONTENTS OF THE ENTIRE STATEME!	DE BY ME.
STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOP	F OF BENEFIT OR REWARD, WITHOUT THREAT C	OSHMENT
AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INI	DUCEMENT. 6754, 664	·
• .		
WITNESSES:	or Parson Making Sta	7
	Subscribed and sworn to before me, a pers	horized by law
_	at Caren For le Ball dad Time	
ORGANIZATION OR ADDRESS	C- (56-1	
	(₩
	616-4,00-21	
	(Typed Name of Person Administer	(h)
ORGANIZATION OR ADDRESS	Art 136 UCH)	
	(Authority To Administer Oa:	
Di Were either of the detainers combatile or leligerant? A NO Did either of the detainers have any noticeable injuries while in the facility? In the facility? ATHOUGH Contiemed has trooted for Aleinaha and Administry of Did you see any bruises on either of the detainers? A NO Q: Do you have anything you which to add to this statement? A NO DEND OF STATEMENT HE ADMINISTRATE OF THE ENTIRE STATEMENT OF THE STATEMENT HAVE MADE THIS STATEMENT HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT CONTINUED AND WITHOUT COERCION, UNLAWFUL INDUCEMENT. WITHERSES: Subscilled and even to before me, a pass to administer of the contents of the even to before me, a pass to administer or other of the contents of the co	2	
20 16 11-4	PAGE _ L _ OF	PAGES
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AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
I The strategies and law Kill Dicember Arith reason by the second of the
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retri
Camp Eagle, Baghdad, Irag D9 MAY 2004 1015 4. FILE NUMBER 67
7. GRADE/STATUS
C Battery 1-87 Field NAIN
55st 676-466-4 Bag dad Tree
On the marries of 7 May 2004 T WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:
Center to escort two prisoners to Camp Cuervo. So my TC and I, SAC
left the convoy and reported to the Detaine Center. It was 0835 when we .
with the view of the ustallite forther and Maria
prisoners personal effects. Doce the inventory was completed the over one
- District and Zip-+illy may were excepted to my vehicle 1879 to be time
ported to camp cuteno. I climbed into the back of the vehicle to assist in
- to-cord on the countries of source of the state of the
The prisoners were lander
TO THE COMMINITION OF THE PROPERTY OF THE PROP
amp light at 0905. The convoy stopped twee due to vehicles the near of
the change could not keep up with the rest of the coally due to traffic
THE CONDY OF WAS AT COME CHANGE THE HOUSE IN John of
WALLEY TO BE THE OTHER MY NEW TO THE 1-82 FA TOT and acket for accept
W. The Drain of Strop Climber into the cap of the website
of the Comp Charles and I proceeded to the Detainer Center. Once I arrived
to enter the Detained Cealer will the and production
The Arisagen class of
If the angular of The Instruction me to bring in
the prisoners inside the Delainer Center Come that was accompanied
SPC SPC Code to the 1-80 FA TOC to return SPC back to work. Then by
with his solders, who were in 672-411
do the title of the PX whatting for him. And then SPC and I programe
EXHIBIT 676-4,66-4
DITIONAL PAGES MUST CONT.
DITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT TAKEN AT DATED
BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER
FORM 2823, DEC 1998 DA FORM 2823, JUL 72, IS OBSOLETE USAPA VI.0

LUB WELLWIRE HOL UMI

DODDOACID-005144

USE THIS PAGE IF NEEDED. IF THIS PAGE IS NOT NEEDED. PLEASE PROCEED TO FINAL PAGE OF THIS FORM.	
STATEMENT OF TAKEN AT Baghdad, Fac DATED 9 MAYO	4
9. STATEMENT (Continued) 670-1,66-1	
A 67e-4,66-4	
Q. Who zip tied and blind folded the detainers?	
A. The guards on duty for that day 6724, 66-4	
Q. who were the guards on duty?	
A. I do not know who they were. 676-4,66-4	
Q. Did you get to see the detainer's before they were bli	nd folder
A. No, they were still in their cell. 676-4,66-4	
Q. Did you notice any injuries or anything unusual as they we	m l
escorted past you to the truck or white you assisted loading the	M INDO
A. Ford not notice any injuries on the prisonor 676-8,6	7.16
Q How good did you look at them?	6-4
A. When I saw the prisoners at Camp Eagle they blind tobletand z	
- 41ed. I noticed nothing out of the ordinary at the time of pic	<u>*</u> k-
up to the time of delivery. 672-4.66-4	
Q What happened at the time of delivery at Camp Cuervo?	
A: At the letaine Center in Camp Cuentryo. I dismounted the vehic	e
. with personal effects and the paperwork for the prisoners. One	2 78-6
I enland the Delainee Centa I met Ste I handed him to Miller work and necessary belong the and he instructed me to have I	10 M
Party in the land of the second of the land of the lan	<u>re</u>
Drisoners brought in 1572-4, ble-4	,
A when you had the prisoners Detaines brought in did you see	any
A. I noticed no injuries of any kind when they were brought in.	176
Q. How well did you see them?	- W
A. I. aid not see the younger prisoner that well but I did s the object prisoner and I did not notice any injuries.	æ
	25-4,40-6
Q. When did you discover that the detainers had injuries?	}
A. The night I returned from camp curvo I was called to the	
C 1-82 FA TOC from the PLL office. CPT told me th	Cano be
· · · · · · · · · · · · · · · · · · ·	
und that they were beaten backen back	
DITU FIRST THEY WERE beaten. 62-4-66-4 DODDOAC	ID-005145
GALS OF PERSON MAKING STATEMENT 6764,66-4 PAGE & OF 3 PA	1
6764,66 PAGE & OF 3 PA	AGES

PAGE 2 DA FORM 2823, DEC 1998

FOR OFFICIAL USE ONLY

EXHIBIT 4

	576-4 106-4 CIDEDS-81 702
STATEMENT OF	TAKEN AT Baghdal Irag DATED 9 MAY 04
	DATED T THAY O'L
9. STATEMENT (Continued) Q: How did you read to +	Untinto 1:2
A. I was shocked, dishe	
inst heard 672-4,6	
·	agle and Camp Cuerro who had an apportunity
1-7	injuries to the detaince's? 176-5,66-5
A. I am not accusing any b	
parson with our apportuni	
	EMENTILL
	6.7E-466-4
. 57c-4,664	3,72-466-4
·	·
	
4	
	
	
	
	
	AFFINANT
17851	AFFIDAVIT
le	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT
WHICH SEGINS ON PAGE 1, AND ENDS ON PAGE 3	I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE
CONTAINING THE STATEMENT. I HAVE MADE THIS STA	LL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE TEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT
THREAT OF PUNISHMENT, AND WITHOUT COERCION, UI	NLAWFUL INFLUENCE OF UNI AWELL INDUCEMENT. 572-4,66-4
	(Signature of Person Making Statement)
-	
WITNESSES:	Subscribed and sworn to before me, a person authorized by law to administer paths, this 72 day of MAV 2004-
	at Detention Facility Como Engle Booked Iraq
	- 67e-186-1
ORGANIZATION OR ADDRESS	(Signature of Person Administering Oath)
,	570-1166-2
	Typed Name of Person Administering Oath!
ODC ANIZATION OR ADODOGO	Art 136 UCMJ
ORGANIZATION OR ADDRESS	(Authority To Administer Oaths)
NITIALS OF PERSON MAKING STATEMENT	
	PAGE OF S PAGES USAPA V1.00
AGE 3, DA FORM 2823, DEC 1998	DODDOACID-005146
	PODDOMOID OF THE C

. .-.

AUTHORITY: PRINCIPAL PURPOSE: ROUTINE USES: DISCLOSURE:	Title 10, United States Code, Section 3012(g) To provide commanders and law enforcement Your Social Security Number is used as an ad Disclosure of your Social Security Number is v	ditional/alternate means of	identification to facilitate	•
1. LOCATION Back	Led Tree		3. TIME 1640	4. FILE NO.
5. NOAS CON ROLAN	676-7,665	B. ORGANIZATION OR A CO 2/5 CAV		<u> </u>
	176-966 S. GRADESTATUS E-S/AD	Camp Eagle	Baghdad, Irae.	
	PART I - RIGHTS WAIVERING	N-WAIVER CERTIFICATI		
Section A. Rights				
suspected/seconds: Sefore he/she asked me any que do not have to answer or hything 1 say or do can be for personnel subject to outing questioning. This is or both. (For civilians not subject is aluting questioning. I under appointed for me before as I am now willing to discuss	estions about the offense(s), however, he/she made in ny questions or say snything. e used as evidence against me in a criminal Irial. the UCMJ) I have the right to talk privately to a lawy swyer can be a civilian lawyer I arrange for at no expr or the UCMJ) I have the right to talk privately to a law estand that this lawyer can be one that I arrange for a	and wanted to quastion me funce: I clear to me that I have the for the before, during, and after quanta to the Government or a series over before, during, and after a truly own expense, or if I can	about the following oftens oflowing rights: sestioning and to have a law military lawyer detailed for a questioning and to have a law not afford a fawyer and war	e(s) of which I am yer present with me ne at no expense to me. ewyer present with me nt one, a lawyer will be
5. COMMENTS (Continue on both Section B. Walver	roverse side) Have been advised of	Your legal right	ts within the las	t thirty days?
I understand my rights as stated without heving a lawyer present	above. I am now willing to discuss the oftense(s) or with me.	der Investigation and make a	-	
ta. NAME (Type or Pnnt)	NESSES (If available)	3. SIGNATURE OF INTER		5.66-5
ORGANIZATION OR ADDR	ESS AND PHONE	SOMETHINGS.	HOLDE	76-1,66-1
la. NAME (Type or Print)		5. TYPED NAME OF INVE	STIGATOR	76-1,66-1
3. ORGANIZATION OF ADDR	ESS AND PHONE	5. ORGANIZATION OF IN 38 # M.P. Deta Baghdad. Ira	vestigator chment (CID)	·
Section C. Non-walver			DO	DDOACID-00514
I do not want to give up my	rights			
☐ I want a tawyer		🔲 I do not went to be q	vestioned or say anything	
SIGNATURE OF INTERVIET	WEE	-		
TTACH THIS WAIVER CERTIFIE	CATE TO ANY SWORN STATEMENT (DA FORM 282	OJ SUBSEQUENTLY EXECUTI	ED BY THE SUSPECT/ACC	USED.
DA FORM 3881, NOV				tar

FOR OFFICIAL USE ONLY

EXHIBIT 5

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 data November 22, 1993 (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 of your social security number is valuntary. 1. LOCATION
5 LAST NAME STOTI NAME STOTI AND TOUS 19:56
8. UNISANIZATION OR ADDRESS 7. GRADESTATUS E-4/AD6764,66
15 FC C 1/2 F (a) 1/2
and the state of t
WANT TO MAKE THE FOUNDAME THE
ON May to 2004 muself and Sol were going on and daily forther to
Dick up basts at camp (wasin a) all and and control resulting to
It time we welle told that we had to as and air
When we we perhing up the deligated Sal The same new mores
land them up in the I M TIC He all
the way to Cheeve After we loaded Soft Signed for the 672-4, of
Destances that we let In lount to Co a livery and
Atald some noises but he was based as a sile
Everytime we bit a huma In the Boad hip class all
the side of the kood, when we maked over sol - 16754
Out of the thick and ask sat was everything okayo 678-5,66-
The voice is that production of the first terms of
atom so move and we were bead head to
WE got there we donk the detroper to the collection
and I left to do and sub this was about 10:30.
150 SFC Was told that he had I save
He ask to use our truck but it was full of north so he used
C90 which is a supply senck for I car Yes FA to ock up the delivered
I drove the thick with saw as my TC this line he bresk
Signed ter the detainers. Me and sate along with an Ilaco 676-5, 6-3
thanilator help load the detainers in to the thuck for
Thom SN-1 Platoon In Aco. 115th Rode In the back of the MILL with
satisfie we was on Comp Weline I'm not for suce 670466
Walenala I have back of the thick on the way book to como
wateright when the detainer were loaded up I took the truck back
EXHIBIT 676-4
11. INITIANS DE PERSON MAKING STATEMENT
DITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT TAKEN AT DATED
ST BE BE INDICATED.
FORM 2022 BEAUGE -
DA FORM 2823, JUL 72, IS OBSOLETE USAPA VI.00

All Demvine new veil.

DODDOACID-005148

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Docket, come out and got in his thick and deare It back the sel point ON Comp Circles, It was about 14:15 pm. Mys. and Soph of the continue of Circles, and want to link with the left of the continue of Circles, and want to link with the left of the continue of Circles, and for the foreign of the foreign o	**************************************
e statement recommends to 82 s Battalions and the dhirek who was In the B back, came out and got in his there and delare It back the SP point ON camp Currier, It was about 14:15 pm. Mus and soft got hack In and there's and went to link with the feet of the comment of Currier and went to link with the feet of the comment of Currier and went to link with the feet of the comment of Currier and went to link and so 72-4,66-4 Q hid you see any uses on the detainers before you lost come was Eagle to comp Currier A. What type of reion did you hear is the back of the to going to camp Currier A. Theald the Itagi talking to each water in these language and A. Theald the Itagi talking to each water in these language and Sec-5 heard soft. A. No. 6 72-466-46 A. No. 6 72-466-46 A. No. 6 72-466-46 A. No. 10 you know SoT. A. No. 11 theald sot. Comp, but I reave talk to him. Q Did you know SoT. A. No. 11 theald sot. Q bid you know SoT. A. No. 11 theald sot. A. No. 12 theal sot. A. No. 12 theal sot. A. No. 14 theal sot. A. No. 15 theal sot. A. No. 16	-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
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A: Yes it was used the next day to pick up shelfs 670	6704
	501.1017 4.66-
Q Do you have anothing you wish to add to this statement?	
A Do Hat is all // END OF ST ATEMENT // 578-4,6	
INITIALS DE BEASON Where STATE OF THE STATE	D-005149
THE SOFT PERSON MAKING STATEMEN	AGES
	SAPA V.1 00

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EXHIBIT L

1-176	24,660 4	21 - 04 - CID 8 9 9 - 8 L 3
STATEMENT OF		d Trag DATED 09 MAY 04
9. STATEMENT <i>(Continued)</i>	9	
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	Nat. Used	1104
	167er	4664
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		\
		
	7e-4,664	
<u> </u>	AFFIDAVIT	
I, WHICH BEGINS ON PAGE T, AND ENDS ON PAGE BY ME. THE STATEMENT IS TRUE. I HAVE INITIAL CONTAINING THE STATEMENT. I HAVE MADE THIS THREAT OF PUNISHMENT, AND WITHOUT COERCIC	HAVE READ OR HAVE A READ OR HAVE UNDERSTAND THE COMED AND HAVE IN STATEMENT FREELY WITHOUT HOP ON, UNLAWFUL INFLUENCE, OR THE AND THE READ OF THE PROPERTY OF	ITIALED THE BOTTOM OF EACH PAGE
WITNESSES:	Subscribed and swo	on to before me, a person authorized by law to
	administer oaths, this	
	- Camp Wa	Engle, Baghdad, Iraq
ORGANIZATION OR ADDRESS	- Calonest	ame of Person Administering Oath)
,	SA	ame of Parson Administering Oath)
ORGANIZATION OR ADDRESS		36 UCMJ
· · · · · · · · · · · · · · · · · · ·		thority To Administer Oaths)
ITIALS OF PERSON MAKING STATEMENT	676-4,66	PAGE 3 OF 3 PAGES
GE 3. DA FORM 2823, DEC 1998	and the thing	USAPA VI.
	FOR OFFICIAL USE ON	LI

DODDOACID-005150 EXHIRIT 6

SWORN STATEMENT 01 5% - 04 - C 1 D 8 99 - 8 I 7 0	
For use of this form, see AR 190-45; the proponent agency is Office of The Daputy Chief of Staff for Personnal. LOCATION DATE TIME LOCATION	\dashv
Camp Cuerro, Ivag 11 May 04 1552	_
LAST NAME, FIRST NAME, MIDDLE NAME SOCIAL SECURITY NUMBER GRADE/STATUS SFC. / (40) 670-4	44
CHICANIZATION OR ADDRESS	\dashv
HSB 1/82 FA, ICD, Bay Had, Ivag	\dashv
WANT TO MAKE THE FOLLOWING STATEMENT UNDER GATH:	7
ON 7 around 1038 2-5 logbock brought two pr-	4,6
detaines in , SGT was one NO and a special on	
the back Of the truck thier was a soldier I Said	
bring paperwork First, I Check Paper work, bood	14-
10 601 1 3410 Bring 12 010 14 17 17 17 17 17 17 17 17 17 17 17 17 17	×
Said look at his back, I Said lot me see	
the other detains was inside cell I, 2-Tlogback	. ,
	74,
Coem that someone hit this pay, send a medic	5
to screen him. We Check the second one out	
the older Gentlemen he said his head	
was bruise, also his shoulder is hurting also	
	72-
this cell waited for Doctor to Come,	
7010 The 120 100	
Vechile was moving from comp wor eggle to here	1
The soldier hit him in his back, knee and	
Lied from the back and blind flod, He said	
his unclo said the same thing. Doctor correct	(
Orocked both of them out He Said Will OK 6	10-9
wall be taken to hosintal for x-ray	
and more Charkap ford statement bre-4.66-4	1
Q: 54 DODDOACID-005151	
A: SFC 670-4,66-4	4
a. Can you describe the soldier in the back of type truck.	
EXHIBIT INITIALS OF PERSON MAKING STATEMENT 678-48661 (CONT)	\dashv
EXHIBIT INITIALS OF PERSON MAKING STATEMENT PAGE 1 OF 2 PAGES	
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.	لـا

MENT (Continued) L 7C-C (Selection)	ATED (May 04 - CONTINUED:
A. Black solider, thin, un O: Did the detainer	eur alasses
	hit at Camp War Each?
A. He SAID he didnot be	thit at land lever End-
Q: Did the dotainer say when he w	us hit divine transport on Commen ?
A. While the trick was	nowing from can power tax to
to Cueroo he got hit u	echicle stud the salding & I.
hit Hashing backsoft soldier	started hitling hom and
unclo.	
a. Were any other guards prese	nr when the detainers arrived?
5/8-6	466-4
A: 425	on the detainers? 1576-4,66-4
Q: who was the doctor who saw +	lar daras age ?
A. PA LT 672.4.66	
Q: Do you have anothing you wis	h to add to this statement?
R. Via soldier who did ,	+ should get punish
Q: Do you have anything you wish	+0 add to this statement?
A. NO	
LEND OF STATEME	NT 5724,66-4
71-4166-4 DA SEELD	
AFFID	AVIT
WHICH BEGINS ON PAGE T AND ENDS ON PAGE 1 FULLY UNDERST. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND I STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL IND	AND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE
	1576-16
	Signature of Person Making St tement
WITNESSES:	
	Subscribed and sworn to before me, a per on authorized by law to administer ceths, this !! day of Play , 2064
ORGANIZATION OR ADDRESS	1201/26
-	
	670
	(Signature of Person Administration 1870)
	<u> </u>
ORGANIZATION OR ADDRESS	(Signature of Person Administration County)
	(Typed Name of Person Administrating Oath) Art 136 UCM 3
	<u> </u>
ORGANIZATION OR ADDRESS	17 (Typed Name of Person Administrating Oath) Lyt 136 UCM J

ub. 61

PRIVACY ACT STATEMENT U. 7 - U 4 - C 1 0 8 9 - 8 1 702
AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
Fritable Action to provide commanders and law enforcement officials with means he which the
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 2 DATE 1
Bankdad Irag 11 MAY 2004 1700
5. LAST NAME BIRST HAME, MIDDLE NAME
8. UNGANIZATION ON ADDRESS
HSB, 1-82 FA, 1st Brigade, 1st Calvary Division, Camp Cherro, Bagldad, Irac.
, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:
ON 7 may of Between 1100-1300 Houps I was cough by THE
SERVERING AT 1500 / WAS ARRESTED THAT AFFORM
ME OF THE 1811 OF 1100 OF THAT
AT THE THE THE
THE MOSCULAR FOR CRIVE 5
Was Fractioned. Miss Risum man and all the
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The state of the s
PAIN, TOO HE PROPERTY
I have the last the tree out 24 Haves als.
DID NOT APPER SEF - INFRICTED . ASSESSING DEADD AGE. THE WOLDT
D. 66-1
A: 67C-4, 56-4
Q- Did you examine the face I let in I had I
A. YES I DIP. HE HAD ARRAYAND THE RESTAURANT THE RESTAURANT TO THE
BACK AND HIS RIGHT KNEE \$ 678-466-4
Q. Are the injuries to the able of the interior
in the back of an IMTV truck 11575-4,66-4
A IT'S POSSIBLE HOWER US MALL HOUSE ASING THE HIGHWAY!
TOSSED AGUAN REED TO HALL REED
END AND CAMPAUM BOWLING ASSAL - DOWNERS - LOWERS
SUPPLIES I DIN THE TENED TO THE PART
self of the Last An port
A. T. H. 1
beach Seat onto the floor of the LMTV?
EXHIBIT 11. INITIALS OF PERSON MAKING STATEMENT
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DITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT TAKEN AT DATED
BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER ST BE BE INDICATED.
FORM 2823, DEC 1998 DA FORM 2823, JUL 72, IS OBSOLETEUSAPAJV1.00

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A	<u> د مرس د مرس</u>	1611	A STACE	E FALL
Q. Are the younger	<u>aetainees i</u>	VALLET COU	sistent with	Fallina
over onto the floor, w	hile sitting	on the floor	r and str	King erther
the floor or side of the tru	ck?	·	<u> </u>	
A. YO HE COND HA	VE RECEIVED	BIS IND	nies 7427	way.
Q: Could the rejuries	also be cost	steat with 5	MCDAR AUAC	Line
Kicking the younger det	- i e - >		DIE PRICE	,
A THE INVENES TO	Hes HER A.			
	7747 774	O DASA	C), 1415 PC	IGKT
KNEE NO.				 -
B. Once you treated the	two detainer	5 what hap	amed to them	next?
A. THE SLOEP PATIENT				
HE WAS SENT BOOK	to comp	CHEYO THE	MEXT DAY	. THE
Yourbon PATIENT WAS	EXPLUPTET !	ATO THE	م دوروسی و	ENTER.
NO FLORTHAN THENTONS	N WAS REAL	VIAED TO	676-4166-4	
Q. Do you have anything	you wish to	add to this		
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EXHIBIT (

For use of this form, and AR AROLE	N STATEMENT 0137-04-C10899-8170
LOCATION	int agency is Office of The Deputy Chief of Staff for Personnel.
Camp Cuerro, Ivag	DATE TIME FILE NUMBER 676-4, 66-4
LAST MAME, FIRST NAME, MIDDLE NAME	COCIAL PERSON
ORGANIZATION OR ADDRESS	SUCIAL SECURITY NUMBER GRADE/STATUS SPC /AD 676-46
HSB 1/82 FA, ICD Backdad.	Ivaq.116-4
The state of the s	L7641
ON About MANY OR MAY ? TWO	WANT TO MAKE THE FOLLOWING STATEMENT UNDER GATH:
	white being brought in by a sec on set
who's NAMES I didn't know anyway I	6411 601
ned people out Side cleating to drop of	C THE TOTAL STATE OF
58+ munnated to see the pay	YOUNG A TOUR
THE OR to improcess the DESAINES'S	to those cell- 891 then save be
me the ok a the Frest was stepped	IP WAS A YOMER MAN HE had been
T and L , T	he that small seather on his back
pit his hards on the wall Cather	in he said was I then hell have to
Hadid so his the	+ off the zip ties an to spread his loss
Mark T /s)	side hust so I told him just I told
his previole and him to Lake all	A STATE A STAT
I told hom I weerled to Search his	WATST (POR beff you town) an I at 1
his shrif up an saw he bland a point	All his had the
I think talk set	Line at the state of the state
1005 back was word to he that Pie	ht 5% said was the billy
It I then parted to I set	All have been been to
Retaring Proposed "Bat Sit"	So then set will back to labore 4.
Har guess to log it a A	is what call to wantem in set
but a ward of it call 3 7 A8k is	I'd you log IT HE SAND I'V got IT
INDE OF SHE AND STATE OF THE I	ASTER FOR the other to the farmes wins 56
These Standay HE CH	me limping up I said 31
I don't Bemember #15 Reply by	ip look all like they got wirp on 676-4 bb
HE HAD ON A button TO COLOR SI	the old MAN ENTESED THE GOAR
Enjery Exeget For him temper	to slich as Dela See vo
EXHIBIT INVITALS OF PERSON	- I LI-4
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THE BOT, AND THE STATEMENT WILL BE CONCEDED ON THE	L PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE V. L.
2023 SUPERINGER	PAM 1853 NIN 68, WHICH WILL BE USED.
1 JUL 72 FUN UTTAV	INC BOL Olari

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670	FILE NUMBER:
STATEMENT OF	TAKEN AT CHUP CUEVUO DATED !! May 04 CONTINUED
I mean you could fell be	the way the old man moved he was fice 4.6
in pain but I put Him	IN the same spot the younges on was
Standing at the wall cut	the stipp ties on Ask to put his Hands
on the will be the	ild man SAID He constrait His SAM WAS 676-4,66
Burting So I this Aid How	to put His good ABM ON the WALL to
Constituted the Still House	End front Here twick up will wrend to los bet
that tripp of 5 stuff Ris	ht. open up the old mans Shirt
After he took of his of	
Camine Prous on tout look	racks on his Shoulden I told Set
SAJ BAID HOLD U	o look at a want prept to the office 1576.4,66
I bis haved the call the	Medica said they would be coming put
FIM IN COUL 4 HO THE O	full this meedies came.
	76-1,66-1
t: 5PC 67	2-4,66-4
Q' Did you see anyone i	nthetruck with the detainees?
A: NO	
B: Did either of the deta	linees say they reveived their injuries at
Camp War Eagle?	A
A: They didn't tell me who	when they were injuried?
A I'M NOT SUBE	The second of th
	vas present when the detain pes
arrived? 50 64C-4	,66-4
tino	
	who treated the detainers?
A: Lt But I'm Not 8	7
Q. Do you have anything	
A.NO END OF	STATEMENT 67C-4,66-6

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676-4,66-4

NITIALS OF PERSON MAKING STATEMENT,

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AUTHORITY:	PRIVACY ACT STATEMENT 37 - 04 - C 1 D 6 9 9	-8170
PRINCIPAL PURPOSE:	Title 10 USC Section 301: Title 5 USC Section 2951: E.O. 9397 Sed November 22, 1943 (SSN). To provide commanders and law enforcement officials with means by which information may be accurately purpled in under the second	
ROUTINE USES:	Your social security number is used as an additional/alternate means of dentification to facilitate filing	ırat el y
DISCLOSURE:	Disclosure of your social security number is voluntary.	and retrieva
1. LOCATION	Sanded Took 3. TIME 3. TIME 4. FILE NUMBER	ER
5. LAST NAME FIRST	NAME, MIDDLE NAME 676-46 SSN 176-467 GRADE/STA	TUS
8. ORGANIZATION OF	F_{-}	10
AC SIZE	(+	
9	17e-166-4	rag
	. WANT TO MAKE THE FOLLOWING STATEMENT UNDER O	ATH:, gel
// A	approximately 1000-1100 hours on 07 May 04 SFC	6
<u>called the</u>	S-2 at The 1-82 TOC, to speak to someone regarding a	new
<u>defenser.</u>	I took the phone call. IFC told me a detained;	net 679
accived, 7	that he scened injured, and that he was complaining of b	مريه
beaten by	an American soldier. SEC wanted to make sure	1686 he 6
reported Y	tright away and requested a madic as soon as posse	6/e
I told S-	-2 and 543 elements and about the Eall and they	<u> </u>
began Go	ntacting a madic	
After 1	lunch, in mid afternoon, I went to the defention or	eawith
a fellow is	interrogator and two translators to do some other interrogation	, , ·
and check	k on the situation with the niw determers. I was told the	
medic has	id ust come not by	
interrogat	tron when the medic came to the first	ne. Y
I sow th	be dat - 5764 56-41;	e out
to the ho	and the same of th	YTER
a broken	home in the madic said he	hard
datainpes	of the desire of the saw of	~<
les. I4.	was shiring that the last of the stand as	<u> </u>
pain.	the received not move his arm without's	everq
Attert	the detailed by the the	
briefly on	Do the Ost The CSH and come back I talked to his	<u>~</u>
de tamas	08 May 04. He said that at camp Engle he had be	en
4 1/1/	and put in a cell, They asked him about his involvement	ih
- The Maker	N	diers
WOKE hm	up at 8300 the next morning and asked him the san	ne ``
- guestabus.	the detarnactures put on a convoy at about 1000.	hows.
D. EXHIBIT	p1c-406-4	
	11. INITIALS OF PERSON MAKING STATEMENT PAGE 1 OF	PAGES
DDITIONAL PAGES MUST	ST CONTAIN THE HEADING "STATEMENT TAKEN AT DATED	. 1000
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	ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE	NUMBER
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STATEMENT OF TAKEN AT Baglidad, Ivag DATED 91 MAY 04	
9. STATEMENT (Continued)	
Every thing was fine and quiet as soldiers put him and his	_
as she w halso detained in the back of a truck. The detainer	_ 1
was gitting blind Collad on a brock, when all of a sudden he felt	
" a kick in his face. The soldier began beating how up, stepping	بأربهب
the wife to be hitten him on the Ave car collect	راريك
by the Then The soldier outled him anto the floor of the	ر الم
trut, at which time his leg hit a metal place of somesort.	2000
The coldier book his naphows shows and nit the dotained on	[
the balls and kicked him in the back, when it was shirings	
The truck was coming to the dastination, the soldier picked him	[
up and 10-situated his clothing Also, the soldier just started	
to beat up the rephow as they were stopping for acciving.	_
The detained expressed his suprise and sadness that	_
some one - In American soldier - would be this to him when he	_ 1
has been making for us for 10 months, and soldiers have all	ا در چد
taken care of hom and his family. The detained even continued b	14-46
working Through being shot at and threatened (He did quit for	_
and the first wat hack to wort	í
When I interviewed him a few days later, on 10 May 04.	
I could find no reasonable convincing reason to believe he b	72-4,0
is involved in the Naholi Army. He was accepted of threatening	
	_
evidence so on my report. I suggested that the und fire him, it is	72-4,0
they have concern. The rost of the detachoo's family work at the bace.	_
	ink
the state of the s	
he to f f	576-6
admitted to.	
0- 678-1 678-466-4	-
1 h75-16 //	-
Quille to the Cell who a let account set for	-
Medical care?	-
^	-
A' CSH stands for The 31st combat Support Hospital.	-
A No you have anything you wish to add to this statement.	-
ITIALS OF PERSON MAKING STATEMENT	
67C-4,66.4 PAGE & OF. S PAGE	s
	V1 00

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STATEMENT OF	TAKEN AT Baghdad, Brag DATED 11 MAY	2004
3. STATEMENT (Continued)	676-4,66-4	
		
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	157C-4,66-4	
	Not used	
	12. (6)	
	576-466-4	
		
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	67C-4,66-4 AFFIDAVIT	
ONTAINING THE STATEMENT. I HAVE	ON PAGE 3. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MAKE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENESIT OR REWARD, WITHOUT UT COERCION, UNLAWFUL INFLUENCE	
	(Sighan deking Statement)	
	(Signal deking Statement)	
	Subscribed and sworn to before me, a person authorized by ladminister paths, this	
	Subscribed and sworn to before me. a person authorized by I administer oaths, this 11 day of WAY . 20	aw to
TNESSES:	Subscribed and sworn to before me. a person authorized by I administer oaths, this 11 day of WAY . 20	aw to
TNESSES:	Subscribed and sworn to before me, a person authorized by ladminister oaths, this 11 day of WAY . 20 at Camp (Mervo, Bashdad, Tray	aw to
TNESSES:	Subscribed and sworn to before me, a person authorized by ladminister oaths, this 11 day of WAY . 20 at Camp (vervo, Baghdad, Tray	aw to
TNESSES: RGANIZATION OF ADDRESS	Subscribed and sworn to before me, a person authorized by ladminister oaths, this 11 day of WAY 20 at Camp Cuerve, Baghdad, Trag (Signature of Person Administering Oath) SA Typed Name of Person Administering Oath) ART 136 U.C.M.J.	aw to
RGANIZATION OR ADDRESS RGANIZATION OR ADDRESS RGANIZATION OR ADDRESS ALS OF PERSON MAKING STATEMENT	Subscribed and sworn to before me, a person authorized by ladminister oaths, this 11 day of WAY 20 at Camp Cuervo, Baahdad, Trag (Signature of Person Administering Oath) ART 136 U.C.M.J. (Authority To Administer Oaths)	aw to

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LU. By

F	SWOR or use of this form, see AR 190-45; the propone	N STATEMENT of the state of the	VT U137 = of The Deputy Chie	O & - C I B 8 9 9 - 8 1 '
Camp (Svervo Iraq willy	DATE	TIME 1810	FILE NUMBER
LAST NAME, FIRS	T NAME, MIDDLE NAME 676	SOCIAL SECURIT		GRADE/STATUS
ORGANIZATION C	2 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			CIV
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1, _	676	41664		
Q 54	674-1,66-1	, WAN! II	O MAKE THE FOLL	OWING STATEMENT UNDER OATH
DT	676-4,66-4	· 		
1 X -1 X	our previous statemen	+ you sai	da soldi	er hit vai
A: No	know which soldier	77'		700
Q: Wher	were you hit by	. 1	 _	·
A: Whi	e marine Conty	the sol	dier s	
Q: (1)00	le moving from to	ne other	camp.	
A: 1)2	you hit while y	ou were	at the	e other camp
D: 11)			<u> </u>	
Q: When	^ 	rit you	<u> </u>	
A. UN W	ly Horehead and my (hes't a	ud back	and he
Poshea	me into the floor	where 7	Ehit m	y Knee.
Q. Were	YOU able to see +	-he sold	ier who	hit you?
A. ND	I' was blindfolded	,		700 -
X. Were	your hands bound	7		DODDOACID-005161
My h	ands were tied bel	rind my	back.	_
A Yes.				k?
Q: Dayon	1-11			
YOU?	Know how many sold	iers wer	e in the	truck with
A: One	I only heard one so	1:05		
me.	THE Y THEATH DIE SO	later get	in the	truck with
Q: How lo	ng did the soldier L	sit you?	-	
A. I thin	E it was 15 to 30	2 minutes		
a. Were	you the only person			the et a soldiers?
A. My un	cle was with me.		<u> </u>	the soldier,
				(cont)
EXHIBIT	INITIALS OF PERSON MAKING STATEMEN			
ACCUTION			PAG	E 1 OF Z PAGES
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		IL HEVERSE SIDE	OF ANOTHER CO	DPY OF THIS FORM. " " "

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A . —		May Of "CONTINUED:
W. Vid the sol	dier hit your in	
A: Yes I he	ard him hittin	s ny made
Q: Was vour un	cla blindfolded	nd hand cuffeel?
A: Yes.	DILLA POLDED OF	na hand cuttect!
Q: About how	1 7	
1 10	old are you?	· · · · · · · · · · · · · · · · · · ·
A- 17		
a. About how	old is your una	ele?
A I Think h	es 50 to 52. I	The part of war
K. VO YOU WIGH	to add anythin	a to this statement?
	*************************************	السناية ميمان المصافح المالات
A. DO VOU WISH	to add anything	to this who have at 10 7
4; He pushed my	head to the DI	TO THIS STATEMENT!
and asked me	"Does it house	por of the truck with his boot
R. Do you wish	+ dd	
di He also su	acla and anything	g to this statement?
to ed to lit in	iched me in +	he chest bor 7 times, and he
THE TO ALL PRIE	LINTER PROIN TO	10+ T. covaled is
12 DO ADO 1012A1 -	to add anything -	to this statement?
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	676-4,66-4 AFEI	
I,_		DAVIT
!, _ HICH BEGINS ON PAGE 1 AND EN E STATEMENT IS TRUE, HAVE	DS ON PAGE T FULLY UNDERS	DAVIT HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT HAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME.
I, IICH BEGINS ON PAGE 1 AND EN E STATEMENT IS TRUE, I HAVE I ATEMENT. I HAVE MADE THIS SE	DS ON PAGE T FULLY UNDERS	DAVIT HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT HAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME.
I,	OS ON PAGE ZET FULLY UNDERS MITIALED ALL CORRECTIONS AND TATEMENT FREELY WITHOUT HO FUL INFLUENCE, OR UNLAWFUL IN	DAVIT
I,I,ICH BEGINS ON PAGE 1 AND EN E STATEMENT IS TRUE. I HAVE I ATEMENT. I HAVE MADE THIS S D WITHOUT COERCION, UNLAWE	OS ON PAGE ZET FULLY UNDERS MITIALED ALL CORRECTIONS AND TATEMENT FREELY WITHOUT HO FUL INFLUENCE, OR UNLAWFUL IN	DAVIT
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TEMENT. I HAVE MADE THIS S'D WITHOUT COERCION, UNLAWF	DS ON PAGE T FULLY UNDERS	DAVIT HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT TRAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE PE OF SENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, 460 LOUCEMENT. (Signature of Person Meking Statement)
ATEMENT. I HAVE MADE THIS S'D WITHOUT COERCION, UNLAWF	US ON PAGE 2 TFULLY UNDERS INITIALED ALL CORRECTIONS AND TATEMENT FREELY WITHOUT HOLD INFLUENCE, OR UNLAWFUL IN	DAVIT HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT STAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. O HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE PE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT. (Signature of Person Making Statement) Subscribed and sworn to before me, a person authorized by law to administer oaths, this (1 day of 1904 20 054)
ATEMENT. I HAVE MADE THIS S'D WITHOUT COERCION, UNLAWF	US ON PAGE 2 TFULLY UNDERS INITIALED ALL CORRECTIONS AND TATEMENT FREELY WITHOUT HOLD INFLUENCE, OR UNLAWFUL IN	DAVIT HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT STAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. O HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE PE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT. (Signature of Person Making Statement) Subscribed and sworn to before me, a person authorized by law to administer oaths, this (1 day of 1904 20 054)
ATEMENT. I HAVE MADE THIS S'D WITHOUT COERCION, UNLAWF	US ON PAGE 2 TFULLY UNDERS INITIALED ALL CORRECTIONS AND TATEMENT FREELY WITHOUT HOLD INFLUENCE, OR UNLAWFUL IN	DAVIT HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT STAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. O HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE PE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT. (Signature of Person Making Statement) Subscribed and sworn to before ms, a person authorized by law to administer oaths, this (1 day of 1904 20 094)
ATEMENT. I HAVE MADE THIS S'D WITHOUT COERCION, UNLAWF	US ON PAGE 2 TFULLY UNDERS INITIALED ALL CORRECTIONS AND TATEMENT FREELY WITHOUT HOLD INFLUENCE, OR UNLAWFUL IN	DAVIT HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT STAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. O HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE PE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT. (Signature of Person Making Statement) Subscribed and sworn to before me, a person authorized by law to administer oaths, this (1 day of 1904 20 054
ATEMENT. I HAVE MADE THIS S'D WITHOUT COERCION, UNLAWF	US ON PAGE 2 TFULLY UNDERS INITIALED ALL CORRECTIONS AND TATEMENT FREELY WITHOUT HOLD INFLUENCE, OR UNLAWFUL IN	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT FITAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. O HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE PE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, 466 IDUCEMENT. (Signature of Person Making Statement) Subscribed and sworn to before me, a person authorized by law to administer paths, this (I day of May 2004 at Camp Curry, Iraq (2004)
ATEMENT. I HAVE MADE THIS S'D WITHOUT COERCION, UNLAWF	US ON PAGE 2 TFULLY UNDERS INITIALED ALL CORRECTIONS AND TATEMENT FREELY WITHOUT HOLD INFLUENCE, OR UNLAWFUL IN	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT HAD THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE PE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT. 46 COUNTY OF PARSON Making Statement. Subscribed and aworn to before ms, a person authorized by law to administer caths, this [] day of Hay .20 04 st Camp Cuervo, Iraq
ATEMENT. I HAVE MADE THIS S'D WITHOUT COERCION, UNLAWF	US ON PAGE 2 TFULLY UNDERS INITIALED ALL CORRECTIONS AND TATEMENT FREELY WITHOUT HOLD INFLUENCE, OR UNLAWFUL IN	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT TRAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. O HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE PE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, 46 IDUCEMENT. (Signature of Person Making Statement) Subscribed and sworn to before ms, a person authorized by law to administer paths, this (I day of May 2004 at Camp Curry, Iraq 120-166-1
TEMENT. I HAVE MADE THIS S'D WITHOUT COERCION, UNLAWF	US ON PAGE 2 TFULLY UNDERS INITIALED ALL CORRECTIONS AND TATEMENT FREELY WITHOUT HOLD INFLUENCE, OR UNLAWFUL IN	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT HAD THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE PE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT. 460 BOUCEMENT. (Signature of Parson Making Statement) Subscribed and aworn to before me, a person authorized by law to administer oaths, this (I day of Hay 2004 at Camp Cuervo, Trag
NITHOUT COERCION, UNLAWF	DS ON PAGE & TFULLY UNDERS INITIALED ALL CORRECTIONS AND TATEMENT FREELY WITHOUT HOLD INFLUENCE, OR UNLAWFUL IN	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT TRAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. O HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE PE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, 46 BOUCEMENT. (Signature of Parson Making Statement) Subscribed and sworn to before ms, a person authorized by law to administer oaths, this (I day of May , 20 044 at Camp Cuervo, Iraq 672-166-166-166-166-166-166-166-166-166-16
ATEMENT. I HAVE MADE THIS S'D WITHOUT COERCION, UNLAWF	DS ON PAGE & TFULLY UNDERS INITIALED ALL CORRECTIONS AND TATEMENT FREELY WITHOUT HOLD INFLUENCE, OR UNLAWFUL IN	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT ITAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE PE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, 46 BOUCEMENT. (Signature of Parson Making Statement) Subscribed and aworn to before me, a person authorized by law to administer oaths, this (I day of May 2004 at Camp Cuervo, Iraq 672-166-166-166-166-166-166-166-166-166-16

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EXFIRM /

	or this form, see TEN 190-45; the proport	ent agency is Unice	or the Deput Chief	of Staff for Personnel
LOCATION Baghdad, Iraq	4	11 May 04	1850137	FILE NUMBER - 0 4 - C I D 8 9 9 - 8 1
LAST NAME, FIRST NAME,	MEDDLE NAME 76-4	SOCIAL SECURIT	YNUMBER	GRADE/STATUS CIV/Iraqi
CRGANIZATION OR ADDR	iraq ()	74-4,66-4	<u> </u>	
	5	11141-		
Q. 678-1, 6	6-7			OWING STATEMENT UNDER OATH:
	4,66-4	1	16-4,66-	· C
Q. Is the statement you gave	ve on 07 May 04, translated by Mr.			nguist, a true and accurate
account of what happened	to you?			-8-24 2 114 224 114 114
	e-4,66-E			
Q. Did you see the individu	al that was assaulting you in the bac	ck of the truck?		
A. When I fell on the floor	I could see a little through my blind	fold and noticed th		
	ription glasses that were white in col	OF.	1572-46	6-K
Q. Did you notice anything		4-11		
Q. Did he have any facial I	vn combat boots on and was kind of		67e-466	- (-
A. No, none that I could see		-4	•	
Q. What injuries did you su		· •		
	strike to my right ear and side of fac	e, a large scratch o	n my left calf mus	cle, a strike to my left side of my
head behind my ear, a bruis	se and some scratches on my back an	ed a cut on the top	of my head.	
Q. Do you know who did th	uis to you?	_		674-4,66-4
A. No, I never seen him bei		(-		
Q. Was he an American sol	dier?			
	7e-4,66-4			DODDOACID-005163
	were in the back of the truck?			DODDOACID-003103
A. One soldier me and my r Q. Was your nephew injure		4,66-4		
	est and back, I could bear him crying		670-4,6	6-4
Q. Did the individual say ar	rything to you?		-	
A. He said something, I do	not understand English, then he start	ed kicking me. 📹	171	-4,66-4
Q. Where you restrained wh	nile in the truck?			164
A. I was handcuffed with m	y hands behind my back, I was also l	blindfolded with so	ome green cloth ma	aterial. 576-466
Q. Why do you think this pe				
A. Don't know, I worked to Q: Who cuffed and blindfoi	r the U.S. Forces for ten months and	never had any pro	blems with soldier	5. 67C-4,66-
	nea you? arge of the cells at Camp War Eagle,	a black mala		
O. Who took the cuffs and b	lindfold off of you when you arrive	a Diack thate.	570	L-4,66-K
Q. Who took the cuffs and blindfold off of you when you arrived at Camp Cuervo? A. I don't know I was dizzy.				
Q. Was the ride in the truck bumpy?				
A. In the beginning but when we left the camp it was not.				
Q. Did you fall off of the beach in the back of the truck?				
A. I did not fall off, the soldier in the back drug me by my hair off of the bench and onto the floor.				
Q. Did any of the injuries you received inspect by accident:				
A. No, the guy in the back of the truck was hitting me, pulling my hair and kicking me. Q. Did anyone besides the individual in the back of the truck injure you?				
A. No.	to wood of the oack of the duck Bije	ше уош:		6 10 9
_	u wish to add to this statement?			-4 Hort
			- 576	· · · · · · · · · · · · · · · · · · ·
EXHIBIT	INITIALS OF PERSON MAKING STATE	EMENT	9-	
				PAGE 1 OF 2 PAGES
ADDITIONAL PAGE	ES MUST CONTAIN THE HEADING	"STATEMENT OF	TAKEN AT	DATEDCONTINUED."
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				
	TEMENT WILL BE CONCLUDED O	N THE REVERSE	SIDE OF ANOTH	ER COPY OF THIS FORM
m - EODM AAAA	 	DA ECODA 2022 4		

STATEMENT Errord Reference source not found. Errort Reference source not	ound. Errori Reference source not found. (Continued)
A. I may need more medical treatment later. 576-411/6	-4
A.No. ///END OF STATEMENT///	
67C-466-4	1C4,66-E
·	
blet	
67 CMIBLE WATER	
VI LIDVALL	
WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE IN STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BEI	ITIALED THE BOTT BELLEVILLE CH PAGE CONTAINING THE
AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEME	INT.
Translated by: 678-466-46 -	(Signature of Person Meking Statement)
Su	bscribed and swom to before me, a person authorized by law star oaths, this11TH_day ofMAY2004
U.S Countractor, Translator at	Camp Cuervo, Bagkdad, Iran
ORGANIZATION OR ADDRESS	37846,00
SA.10	(Signature or Person Administering Oath)
	VIN E. WAHL
organization or address	(Authority To Administer Oaths)
INITIALS OF PERSON MARING STATEMENT	PAGE 2 OF 2 PAGES
FOR OFFICIAL USE ONLY	3
• • • • • • • • • • • • • • • • • • • •	DODDOACID-005164 EXHIBIT 12

SWORN STATEMENT U137-04-CID899-81742
For use of this form, see AR 190-45; the proponent agency is Office of The Deputy Chief of Staff for Personnel.
LOCATION CAMP FOR IN I rag 14664 12 May 04 1130 LAST NAME, FIRST NAME, MIDDLE NAME 6 SOCIAL SECURITY NOMBER GRADE/STATUS
LAST NAME, FIRST NAME, MIDDLE NAME O SOCIAL SECURITY NOMBER GRADE/STATUS
FIRGANIZATION OF ADDRESS 678-4,66-4
HHC 1-12 CAV, ICD, Backdad, Ivag
176-466-4
On May 6 7004 at approximately 1400 or 1500 I was instructed to as to
the detainer center and screen a detainer who was complaining of diarrhos Once
I got there the quand translator and myself entered the holding cell where
the detainer was lying on a matress. I proceeded to ask the detainer a ten
questions through the translator. The detainer states that he had had 3 or 9
episodes of diarrhan within the past 12 hrs the stated that there was no
if he had vomited and he said he hadnot. I then checked his blood pressure
and his pulse rate both of which were within the normal range. I palorted
his some abdomen region in which I found that he was tender in his bower s
left and lower tenter quadrant I also auscultated his abdomen and found
active bowel counts in his lower left and band middle guarant. The patient
touch with the aidstation and talked to 12T Tout I talk him what 672 &
I had tound and gave him all the intermation, and he told me to give the avoid some medication. The medication was Loperamide which is an
anti-diarcheal medication the medication was Logeramide, which is an
I to the hour for all it was for each hour office to charle the it
I the did as I was instructed and then I left and came back to bic
The aidstation Ald further contact was made by the detainer center to
the aidstation to. the remainder of my shift
1X SA
$\frac{\lambda}{\Omega}$
A: NO
Q: Did you observe any other injuries to the detainer?
A: All I saw was his stomach and I did not see any injuries
(cont)
EXHIBIT INITIALS OF PERSON MAKING STATEMENT PAGE 1 OF 2 PAGES
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
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		KEN AT	THEY SIL ZHAY D	Z A CONTINUED:
ATEMENT (Continued) O: Did the de	etainer hour .	ani. hair		
A: NO	, .	EN DUNCES	or injuries onl	us head!
				
W. Will Take De	rainer comple	ain of any	other pains or	injurics other
THE CHEAT	rea:		<u> </u>	
A: NO	···	-		•
Q: Doy ou how	or snothing you	wish +00	dd to this states	201-47
A NO	· · · · · · · · · · · · · · · · · · ·		<u> </u>	WE VII
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		1010	1//	12-4,66-4
		 		
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TATEMENT, I HAVE MADE TH	AVE INITIALED ALL CORREC HIS STATEMENT FREELV WA	TIONS AND HAVE INIT THOUT HODE OF BENE	TIALED THE BOTTOM OF EACH P	A COLORABINA THE
ND WITHOUT COERCION, UNL	LAWFUL INFLUENCE, OR UN	LAWFUL INDUCEMENT	T.	
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				(2) · -
				672-4,66-4
WITNESSES:			Sigliauresone commeki	ng tementi
WITNESSES:		Sub to adminis	scribed and sworn to before me,	ng tementi
WITNESSES:		to adminis	scribed and sworn to before me, iter oaths, this 12 day of 100	a p on authorized by law
WITNESSES: ORGANIZATION OF ADDRESS		to adminis	escribed and sworn to before me, iter oaths, this /2 day of 12.	a p on authorized by law
	3	to adminis	scribed and sworn to before me, ster oaths, this 12 day of Many English Bandad.	a p on authorized by law
	3	to adminis	escribed and sworn to before me, iter oaths, this /2 day of 12.	a p on authorized by law
	3	to adminis	iscribed and sworn to before me, iter oaths, this 12 day of Manager Bay hard	a p on authorized by law
ORGANIZATION OR ADDRESS		to adminis	iscribed and sworn to before me, iter oaths, this 12 day of Manager Bay hard	a p on authorized by law 24, 2004 Long 10-1,66
ORGANIZATION OF ADDRESS		to adminis	(Signature of Person Admit	a p on authorized by law 24, 2004 Long 10-1,66
		to adminis	(Signature of Person Administration of Authority To Administration	a p on authorized by law 24 2004 Loop 7C-1,66 ast ig Oath 57C-1,66
ORGANIZATION OR ADDRESS		to adminis	(Signature of Person Adm)	a p on authorized by law 24, 2004 Long 10-1,66 set in Oath 570-1,66

60.75

AGENT'S INVESTIGATION REPORT	0137-04-CID899-81702
CID Regulation 195-1	PAGE 1 OF 2 PAGES
DETAILS 67C-166-1	676-586-5
About 0830, 14 May 04, SA	name check results regarding SGT Camp War Eagle, Baghdad, Iraq, which revealed
no derogatory information.	16-5,66-5 hoots from 11 T
About 0925, 16 May 04, SA A Secretary Seized SG1	Camp War Eagle, Baghdad, Iraq, as evidence on
DA Form 4137 voucher number 401-04, 16 May 04	4.
All 10055 40 Name of State of	11 Total who rendered a sworp
About 0955, 16 May 04, SA Interviewed statement detailing his storage of SGT	boots. (See Sworn Statement for details)
676-66-1	676-4,66-4
About 1015, 16 May 04, SA interviewed	2LT A Co,
2/5 CAV, 1CD, Camp War Eagle, Baghdad, Iraq, woobservation regarding the storage of SGT	ho rendered a sworn statement detailing his 676
observation regarding the storage of SGT	boots. (See Sworn Statement for details) 6
About 1105, 16 May 04, SA interviewed	676-4.66-K
About 1105, 16 May 04, SA minimum interviewed	11LT HHC, 2/5
CAV, 1CD, Camp War Eagle, Baghdad, Iraq, who re	endered a swom statement detailing his
knowledge of the condition and treatment of the det	lainees. (See Sworn Statement for details)
About 1620, 16 May 04, SA Salaminterviewed	678-466-4
About 1620, 16 May 04, SA	SPU who provided a clean copy of his
sworn statement made on 11 May 04, which details	and treatment or
the detainees. (See Sworn Statement for details)	1 - 1 - 1/4 h (- 1/1
67°-1,66-1	676-4.66-4 I CPL
About 1025, 23 May 04, SA	rod a swam statement detailing his conversation
MI BN, Camp Ironhorse, Baghdad, Iraq, who rende	180 a swort statement detailing his conversation
with the detainee. (See Sworn Statement for details	676-4,66-4
672-1,66-7 About 1205, 23 May 04, SA	
About 1205, 23 May 04, SA Land interviewed CAV, 1CD, Camp War Eagle, Baghdad, Iraq, who r	endered a sworn statement detailing his
knowledge of the detainee's condition. (See Sworn	Statement for details)
knowledge of the detainee's condition. (See Sworn	67 C-4, 66-4
About 1220, 23 May 04, SA Dinterviewed	
CAV, 1CD, Camp War Eagle, Baghdad, Iraq, who r	
knowledge of the detainee's condition. (See Sworn	Platament for datails)
62C-4, 66-4	67C-4,66-4
About 1230, 23 May 04, SA	
CAV, 1CD, Camp War Eagle, Baghdad, Iraq, who	
knowledge of the detainee's condition. (See Sworn	Statement for details)
TYPED AGENT'S NAME AND SEQUENCE NUMBER	ORGANIZATION
1-1-1.66	38 th MP (CID)
670 62	Baghdad, Iraq APO AE 09342
SIGNATURE	DATE
SIGNATURE SIGNATURE SIGNATURE SIGNATURE	24 May 04 1407E
CID FORM 94 FOR OFFICIA	L USE ONLY
1 FEB 77	DODDOACID 006167

Sign.

AGENT'S INVESTIG	ATION REPOR	ROI NUMBER	7 A4 OIDBBD B4789
CID Regulation		013	7-04-CID899-81702
	1.66-1		2 OF 2 PAGES
About 1250, 23 May 04, SA CAV, 1CD, Camp War Eagle, B knowledge of the detainee's cor	interviewe aghdad, Iraq, who ndition. (See Swon -(266-) coordinat	rendered a sworn stater Statement for details) ed with CPT	72-3156-3 Trial Counsel,
probable cause existed to believe and no further assistance was r	eve SGT	committed the offer	nse of Aggravated Assault
•			
	16-1		
TYPED AGENT'S NAME AND SEQUENCE	62-466-1 62-466-1	organization 38 th MP (CID) Baghdad, Iraq APO AE	09342
SIGNATURE	76-4664	Z4 May OG	14 60.77
CID FORM 94 1 FEB 77	FOR OFFICIA	AL USE ONLY	

For	SWORN STATEMENT use of this form, see AR 190-45; the proponent agency is Office of The Deputy Chief of Statistics February
LOCATION	Eacle I raq 4.66 16 Hoy 04 0955 4.66 4.
	NAME, MIDDLE NAME. B SOCIAL SECURITY NUMBER 62 GRADE/STATUS
ORGANIZATION OF	S Cav, ICD, Camp War Engle, Iraq 1866-4
7 00 10	the support of the state of the support of the supp
\ <u>\</u>	WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:
	room to secure his boots. I went to bize-5,66
56T	room to secure his boots. I went into his
room	with 2LT as a witness. I secured bic-4
_ the ho	ots in a lockable metal tat box with locks
that	conty I had keys for. I then secured the box
insid	I the company grms room. At 0915 16 May 64
Speci	cal Agent arrived to collect the boots from 676-
me	
Q: 5 k	b7c-1166-1
4: 1/ T	676-4,66-4
0: 0:	myone else have access to the box where the boots were kept?
A NO	THE EIST VIEWE ACCESS TO THE TOP WORTH I'M DOO'S SOUTH
	I a dim it is expressed to
K. 1/0 400	have anything you wish to add to this statement?
X. 100	ID OF STATEMENT/// 67C-4, 86-4
IN ON	ID OF STATEMENT/// 67C-4, 66-4
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	670-4,66-4
	DODDOACID-005169
	EXHIBIT 15
	
	FOR OFFICIAL USE ONLY 674-4,66-4
EXHIBIT	INITIALS OF PERSON MAKING STATEMENT
	PAGE 1 OF 2 PAGES
ADDITION	IAL 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 "PA	THE STATEMENT WILL BE CONCLIDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

1	67X-4,66-4	
STATEMENT OF	TAKEN AT THE	HE NUMBER:
ATEMENT (Continued)	TAKE A	DATED/6 May 04 "CONTINUED:
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	1576-4,66-4	
•	1 - 11 -	
	AFFIDAVIT	
I, L THE BEGINS ON PAGE 1 AND ENDS STATEMENT IS TRUE. I HAVE INIT EMENT. I HAVE MADE THIS STAT WITHOUT COERCION, UNLAWFUL	ON PAGE Z. TFULLY UNDERSTAND THE CO	EAD OR HAVE HAD READ TO ME THIS STATEMENT NTENTS OF THE ENTIRE STATEMENT MADE BY ME. ED THE BOTTOM OF EACH PAGE CONTAINING THE OR REWARD, WITHOUT THREAT OF PUNISHMENT.
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H BEGINS ON PAGE 1 AND ENDS STATEMENT IS TRUE. I HAVE INST EMENT. I HAVE MADE THIS STAT WITHOUT COERCION, UNLAWFUL NESSES:	ON PAGE Z. TFULLY UNDERSTAND THE CO. TIALED ALL CORRECTIONS AND HAVE INITIAL TEMENT FREELY WITHOUT HOPE OF BENEFIT. INFLUENCE, OR UNLAWFUL INDUCEMENT. Subscript administer	NTENTS OF THE ENTIRE STATEMENT MADE BY ME. ED THE BOTTOM OF EACH PAGE CONTAINING THE OR REWARD, WITHOUT THREAT OF PUNISHMENT, [Signature or reason Making Statement] bed and sworn to before me, a person authorized by law oaths, this 16 day of May 20 06/
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H BEGINS ON PAGE 1 AND ENDS STATEMENT IS TRUE. I HAVE INSTEMENT. I HAVE MADE THIS STATEMENT. I HAVE MADE THIS STATEMENT. UNLAWFUL MESSES: BANIZATION OR ADDRESS	ON PAGE Z TFULLY UNDERSTAND THE CO. TIALED ALL CORRECTIONS AND HAVE INITIAL TEMENT FREELY WITHOUT HOPE OF BENEFIT. INFLUENCE, OR UNLAWFUL INDUCEMENT Subscrit to administer at School	NTENTS OF THE ENTIRE STATEMENT MADE BY ME. ED THE BOTTOM OF EACH PAGE CONTAINING THE OR REWARD, WITHOUT THREAT OF PUNISHMENT, [Signature or reason Making Statement] bed and sworn to before me, a person authorized by law oaths, this 1b day of May 20 oct [Signature of Person Administering Oath] [Typed Name of Person Administering Oath] ATT 136 UCH

For t	use of this form, see AR 15		STATEMEN agency is Office		of of Staff for Personnel.
LOCATION	Easle, Ivaa	<i>W</i> [DATE 16 Hey D4	TIME 1015 063	FILE NUMBER
LAST NAME, FIRST	NAME, MIDDLE NAME	1681	OCIAL SECURIT	Y NUMBER CALL	GRADE/STATUS ZLT/4D
ORGANIZATION OR	ADDRESS Cav ICD Can	www Earle	I 900		
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OR/ 14	MAYOY	1 observ			Attach
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were in	ventories	and loc	Ked 1	, 4/4/	T Box labeley
Q:5A	67	e-1,667			
AL ZLT		76-4,66-4		Labora 7	· · · · · · · · · · · · · · · · · · ·
4: IN the	was the bo	Mand Po		ICKEA:	
Q: Dad u	Tho had acces	is to the be		ir was loc	ked?
K. I wou	ld assume	cally 11.			but he dont
Qi Po you	rave anything	you wish -	ro add to	this sta	truncit?
A. NO	ND OF ST	ATEME.	UT///		678-4,66-4
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EXHIBIT	INITIALS OF PER	SON MAKING STATE	MENT		PAGE 1 OF 2 - PAGE
THE BOTTOM OF I	EACH ADDITIONAL PA	GE MUST BEAR TH	E INITIALS OF	THE PERSON MA	AT DATED CONTINUE KING THE STATEMENT AND B IE BACK OF PAGE 1 WILL BE

LINFO OUT AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

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STATEMENT OF	TAKEN AT	Completiveste	1:2€ NUMBER:	# 005 Thurses
ATEMENT (Continued)			DATED 16 Hay 04	CONTINUED:
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	AFFI	DAVIT	<u> </u>	
i,		11444	R HAVE HAD READ TO ME	THIS STATEMENT
CH BEGINS ON PAGE 1 AND ENDS ON PAGE 1 AND ENDS ON PAGE 1 HAVE INITIALED THE STATEMENT IN HAVE INFLUDICATION OF THE STATEMENT WITHOUT COERCION, UNLAWFUL INFLU	T FREELV WITHOUT HO	, uwae iniliaren il	PE BUTTOM OF EACH PAGEWARD, WITHOUT THREAT	E CONTAINING THE TOP PUNISHMENT,
TNESSES:		70	Bundana o'di ensem MBKIUB.	ाबरबातकारी .
	<u> </u>	to administer caths	nd swom to before me, a po this 16 day of Nay 15ale, Trac	erson authorized by law 20 <u>04</u>
SANIZATION OR ADDRESS			7 2 4	b76-1,6
THE THE ST ADDRESS				P16-510
		(Si	gnature of Person	1970 dible
		SA		
SANIZATION OR ADDRESS		(Тур	ed Name of Person Adminis	rering Oath)
		Ar	136 UCM)	
			(Authority To Administer)	Daths)
ALS OF PERSON MAKING STATEMENT		176-4,6	6-4 PAGE 20	F Z PÀGES
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	EAD ACCOMAL	OC OBUV		<u> </u>

FOR OFFICIAL USE ONLY

DODDOACID-005172 EXHIBIT 16

45

•	SWOR	N STATEME	VIT	. 16
For use t	of this form, see AR 190-45; the propose		of The Deputy Chief	
LOCATION COMO WO	av Eagle Iraq, 4.464	16 Hay 04	11.05	FILE NUMBER
LAST NAME, PRET NAM	PANODLE NAME	SOCIAL SECURIT	Y NUMBER	GRADE/STATUS
ORGANIZATION OR ADE	APERE .		6,	1LT/40
	av, ICD, Camp War		rag	
1,_	676-46	WANT	TO MAKE THE FOLL	OWING STATEMENT UNDER OATH:
On 5 M	y 2000 in the a	Phrneen.	around 1	400 ha, the 57
Captain	with the	selp of z	the scout	plateon and ok-
one s	niper team detain	-d 2 x	security	quards working
at FOR E	agle No force we	5 115.20	to detan	
security go	varie because there is		TOP MECES	
Sugration Tires	loved the scout	plator	to essen	- wegpon to the
defairee a	ell. I say both	security	guerds	in mediate la after
they were	detained: both		ing com	fortable at the
choc while	le they procked to	be more	I to the	detance cally
Cot	made a pop	int to	treat t	Kin sicely 612-11
because 7	he were workers -	n the c	<u>ampa "ana</u>	most of the
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Kon Ha	, had been quest	hierer	I sau	the detanes.
after they		· · · · · · · · · · · · · · · · · · ·	them to	
immediate		··	interes	
were fold	we had to he	11 1	ustil roc	on opened up the
This did	of hyppen until +	he morn.	no of f	he 7th I die
not see	then that moon	<u> </u>	I was a	only made air
of the 53	husban of the det	Inece by	<u>a pho</u>	wolf from a
doctor at	one of the faci	liber a	few da	w later Hothin
Follows	67E-4,66-4	61C 464	-4	DODDOACID-005173
				DODDOACID-005173
	FOR OFFICIAL	AZE DNIA	176 (16674	EXHIBIT V)
EXHIBIT	INITIALS OF PERSON MAKING STA	TEMENT	610	PAGE 1 OF 2 PAGES
	PAGES MUST CONTAIN THE HEADIN			ATDATEDCONTINUED."

INITIALED AS "PAGE OF PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE I INIED OUT AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

676	4,564	.	
STATEMENT OF	TAKEN AT Compubitagle	Fix NUMBER	•
STATEMENT (Continued)		DATED 16 Hay 04 - CONTIN	UED:
Q:54 1576	-1,66-1	0187-04-CID899	- 0 - 200
A: 1LT 678-6	-,66-4	<u> </u>	-01 /02
			
Q. Did either of the	Retainees lesist	apprehension!	
			
Q. Did either of the de	tainees have any u	isible bruises orwoi	ands
THEN YOU LAST SAW TO	em?		
A. Na	·		
Q' Did either of the deta	since's tell you they	were hit or bud bee	n laurt 7
X, 140			Ì
Q: Do you know to ho was	worden stadens	at lane marine line and a series	
i Trunsonrypa ·	Darair & The Ble lactifice	THE MANUEL THAY WERE	
A' I'm hat sure			——— J.
			
A: No	ything to This sta	toment c	
	Telacion III	67E-4,664	·
2010 OF 3 1A	TEMENTAL	7.00	
	674-4,664		
(1-	4		
671-11.66-	AFFIDAVIT		
i, _	HAVE BEAD	OR HAVE HAD READ TO ME THIS STATE	FMENT
WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2 THE STATEMENT IS TRUE. I HAVE INITIALED ALL C	I STRIVINIDED CTANK THE CONFIEN	TO AC TUC CRYING ASSESSMENT ASSESSMENT	
STATEMENT. I HAVE MADE THIS STATEMENT FRE AND WITHOUT COERCION, UNLAWFUL INFLUENCE,	er von Cernin en 196 de beweelf ac 8	EWARD, WITHOUT THREAT OF PUNISH	MENT,
	OR UNLAWFUL INDUCEMENT.		b76-4,66-
• .			/'- `
WITNESSES:		alking Statement)	
	- Subscribed &	nd sworn to before me, a person authori	zed by law
	to administer onths	, this 16 day of May , 20 00	<u>*</u>
ORGANIZATION OR ADDRESS			576-1,66-1
	(SI	gine of Person Admit	674-1,66-
	s4 9	and Substitute	
ORGANIZATION OR ADDRESS		ed Name of Person Administering Oath)	
THE STATE OF THE S	A	CT 136 UCM.)	
		(Authority To Administer Oaths)	
INITIALS OF PERSON MAXING STATEMENT			
	676-4,66-1	PAGE 2 OF 2	PAGES
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FOR OFFICIAL Val will

DODDOACID-005174

EXHIBIT 17

91,37-04-CID899-81,702

- CIA	ODN STATEMENT	17/04/5/
SW For use of this form, see AR 190-45; the pro	ponent agency is Office of The Deputy Chi	et of Staff for Personnel.
LOCATION Camp Wervo, Iraq	DATE TIME 16 Hay 04 16 20	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME	SOCIAL SECURITY NUMBER	GRADE/STATUS 676-4,64 SPC / FD
ORGANIZATION OR ADDRESS HSB 1/82 FA ICD, Bach	dad Ivag	DODDOACID-005175
670-	WANT TO MAKE THE FOI	LOWING STATEMENT UNDER DATH:
ON About MAY 4 OF MAY 7 TWO	defainess A Young ONE A	A OLDER ONE CAME.
to this OctaiNEE COLL (BHA). THERE	WERE being brought in	by a spc and sof whois
NAMES I didn't KNOW. ANY WAY I CO	Alled on Set 18th	hm know we had
people outside wanting to drop	of Ostalaness So AS US	DALLY Sot BR-4,6
wanted to See the paperwerk A	w I was to stand by fo	A the of to inprocess.
the Detrivers to there call. Sal		
Stepped up was a younger man to		
I then told him to put his han		
AN SORBAR TUS 1653 HE did So but		
dust Hold out I wood to Seanch	him He said of I w	607 Hopewhis
	lis shows seaach his	
Him I NEEded to SEABCH his	unist (FOR bolf Ect.)	An I pulled His Shiet
UP An SAW HE HAND PRINT ON	ris back that look like	A boot I than told
Set A Set Print on 1	NG GOHA book like pr	ntow his back be
Like NEED to log that Kight "	sold Yeah	16t: MG SCFit- I BICT
this pointed to it Sat	Disk him How he got	it an the lataines by
Besponded Sat Sat Then s	bet back to	the office I suess
to log it. I ask what call you	NANTOM IN SOF	HE SAID COILS 6
This did you log it the said.	Id got it by a mod of h	15 neado amen 1 Adices
FOR the other DETAINER who	S INAS ONESIDE ON S ■ These Natainess	ARE Bruced up look
like they got was and T choice	Remember His Bea	he but the old man
Entered the Door He Had a	N A buffon up calo	676-4,0
COUL REALLY SEE NO ININ	by GXCEPT FOR Him	limoin An
Slocking Downword . I morn	You could 1611 by th	6 WAY the old MAN
Moved The WASINDAM but	I put Him in the SI	TME Spot the Yourses
*	r-Dames Island	4,66-4 (cont)
EXHIBIT INITIALS POR FREICHLAUS	JALLANENI	PAGE 1 OF
ADDITIONAL PAGES MUST CONTAIN THE HE	ADING "STATEMENT OFTAKEN	AT DATED CONTINUED."
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BE INITIALED AS "PAGE OFPAGES." WHEN A	AR THE INITIALS OF THE PERSON M. ADDITIONAL PAGES ARE UTILIZED, TI	AKING THE STATEMENT AND BE HE BACK OF PAGE 1 WILL BE" " 8
LINED OUT AND THE STATEMENT WILL BE CONCLU		

670-4,66-4

01: -04-CID # 99-8 : 7.02 FILE NUMBER:

STATEMENT OF TAKEN AT COMP CUENCY DATED 16 May 04 CONTINUED
this Hands on the well the ald MAN JAIN HE couldn't His ARM
was turting. So I thin told them to put this good ARM on the wal
I Notice the Bruss on his les an told get Then I broke
Continued on Spirit these two Right Here Are ficked up we was
TO THE TYPE OF THE PERF OF THE BLOCK BLOCK BLOCK BLOCK
After the took off his shows an there it was look like a hongre
Coming Davin on a looking wasty on his shoulder. I told set
said Hold up looked of it was to the aller
+ peleause the CALLED the MEDIC Stud the would be de
THE WAY WAY WAY WAY OF THE THE TANK CONDITION
KN WE DOX HIM IN THERE LILL THE MEDICE CAME
Q: SA 67K-1,66-1
A: SPC -4.66-4
Q: Did you see anyone in the truck with the detainees?
<u> </u>
Q. Dirl either of the detainers soy they received their injuries at Camp War Eagle?
A They didn't toll MG WHERE
R. Did the detainees say when they were injured?
A: I'm not suas
Q'. Were any other guards present when the detainers arrived?
A.NO
Q: Who was the doctor who treated the detain ees?
A. L. But I'm Not SURG
a Have you learned anything new regarding the detainces injuries
Since 11 May 04?
AINO
Q: Vo you have anything you wish to add to this statement?
END OF STATEMENT 100-4,664
TOD OFFICIAL HOT DAILY
NITIALS OF PERSON MAKING STATEMENT
NITIALS OF PERSON MAKING STATEMENT: 676-77
PAGE OF PAGES OF

DODDOACID-005176

EXHIBIT 18

676-466-4 . LE NUMBER: DATED 16 May 64" CONTINUED: STATEMENT (Continued) 0137-04-CID899-81702 bz Egg DODDOACID-005177 AFFIDAVĪ 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 OF REWARD WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT (Signature or Person WITNESSES: Subscribed and sworn to before me, a person authorized by law to administer oaths, this /6 day of May . 20 09 at Cama Cuerus Trag ORGANIZATION OR ADDRESS Signatura of Person Adm ing Oath) (Typed Name of Person Administering Oath) ORGANIZATION OR ADDRESS 136 UCMJ (Authority To Administer Caths) INITIALS OF PERSON MAKING STATEMENT **PAGES** 67c-4.66-4

FOR OFFICIAL USE ONLY

EXHIBIT ..

SWO	RN STATEMENT
For use of this form, see , 30-45; the propon	ent agency is Office of The Dej Chiaf of Staff for Personnal.
LOCATION CAMP I replace	PAGE INVESTIGATION OF THE PROPERTY OF THE PAGE IN THE
LAST NAME, FIRST NAME, MIDDLE NAME	3/19/04 -09:15 SOCIAL SECURITY NUMBER 01 S GRADESTATUS
	E-4 676-466
ORGANIZATION OR ADDRESS	Timbers Trans
A GO 312 MIBN, Camp	61-4
010	WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:
that I questioned	WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH: 100 07 / 100 2004
was inprocess	ed to the first Brigade holding 676
area of the first calvary	division on about 06 May 2004
ac 07 M, 2004 where he	was made cally screened and then
questioned by my self.	had bruises on his by 6
forehead and on his knoc	. He was brought in by 2-5
Car from Comp Engles	told me that by
he was placed in a cell	for two or three days and
	- day that
+ har relation that was u	1th him were transported to
the BHA, they was la	aded on to as EMTH after
being blinded. Two lade	widness 6 hindfolded + h- 676-4,66
Subjects One was a mast	er sergeent or above and the
other was a PFC or b.	clave One person got on to
the LMTV with the de	tapacs. did not 670-66
see who this person was.	This person began to beat
earl his re	latine during the convoy 676-4,66
towards Camp Currue	
Q: SA 67C-1,66-1	
A. CIL 67C-1966	
Q. Did the detainer state	he received any of his injuries
wile at Camp Eagle!	5/2-4
A. Stuted the	+ he received his injuries on 35
the way to Comp (worked	2
	se how he received his injuries!
A Said that	he was beaten, 676-4, 86-4
Q: Did he say who beat his	m & 67C-46666
	(CDRT)
EXHIBIT INITIALS OF PERSON MAXIMORETA	TEMENT 57C-466-4 PAGE 1 OF 2 PAGES
ADDITIONAL PAGES MUST CONTAIN THE HEADII	
	THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE TIONAL 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.

DA FORM 2823

SUPERSEDES DA FORM 2823, 1 JAN 68. WHICH WILL BE USED.

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170	Com Trouba	AC ITLE NUMBER:	10003-81
STATEMENT OF T	AKEN AT Every	DATED 23 Hay 04 = 1	NUED: 4
		•	674-100
A. The person who got	sto the LMTV	with	and
his relative beat the	m.		
who this was		624 G (4	specifically
D' D. ()		b16-4966-4	
Q: Did he say if he rec	eived any of	his injuries att	er
aldiving a- Camo C	vervo?	J	
ki No he did not.	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
D'D			
G. Do you have anything , I'm The crime that	you wish to a	edd to your staten	rent 7
to The crime that		and a series of the	11 1678
nat seem file in t	1 -1	· L	ara yr
not seem fitting to	Ats Charac	THE FLYNS P	· <u>· · · · · · · · · · · · · · · · · · </u>
Lealition Forces, and	retained the	1 statiment who	e bedag
- questioned by payer 1.			-].
2. Do you have anything you	wich in add	T) 000 1 Fort 200 4	7
1. 11.	MANUAL WAY	CO YOU STUTENT	7
MELTIN DELTI			
11 END OF SIX	IEMEIUI/	67C-47	66-4
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A	ALMINI MAIDE LIE BEWEELL U	R REWARD, WITHOUT THREAT OF PL	INING THE
AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR U	NLAWFUL INDUCEMENT.		10-4,66
•		b	10 11
· ·			·
WITNESSES:		Signature of resident ting Statem	t) .
	Subscribe	ed and swom to before me, a person a	nortzed by law
	to administer of	oths, this 23 day of May , 2	04
		7 70000000	67C-1166-1
ORGANIZATION OR ADDRESS			* • • • • • • • • • • • • • • • • • • •
		(Signeture of Person Adminis	1 56
			b7c-1,66
	5h		
ORCANIZATION OR ADDRESS		Typed Name of Person Administering	th)
ORGANIZATION OR ADDRESS		for 136 DEMS	
		(Authority To Administer Caths)	
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MR ઉત્પ	CHL DOE DIOLY	DODDOACID-005179	

For use of this form, see . 90-45; the proponent agency is Office of The De Chief of Staff for Parsonnel.
LOCATION DATE TIME 0187 FILE RUMBER D899-81 Comp Wav Early I vag 23 May 04 1205 676-4.66-4
LAST NAME, FIRST NAME, MIDDLE NAME SOCIAL SECURITY MUMBER GRADE/STATUS CPL/AD 57-4
H.HC, -Z.5 Cav ICD Camp War Earle (Irag
WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:
UN 1 MAY 04 From the hours of pass and orgo
I worked at the detainer Cell. While I was there I did not witness Any mistreatment of detainers
or notice any signs of distress. Detaines were have
very professionally and they were cooperative.
Q: 54 57C-1,66-1
A. CPL 1996-14,66-14
O. Did the detainces complain of any injuries while you were on shift?
4. NO
Q: Did you notice any preexisting injuries on the detainee?
A. NO
Q: Were the detainees combative or resisting during your shift?
Q: Did you assist in loading the detainces for transport?
A. YES while they were bound and blindfolded I quided
them to the VEHICLE FOR TRANSPORT
for transport or loading?
A: NO
Q: Was it necessary at anytime to forcibly move the detainees?
A: NO
Q: Who bound and blindfolded the detainees for transport?
1. MSG 516-4,66-4
A: NO
IN END OF STATEMENTING MENERGE
EXHIBIT INITIALS OF PERSON MAKING STATEMENT 6764
EXHIBIT INITIALS OF PERSON MAKING STATEMENT 576-11 PAGE 1 OF 2 PAGES
ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OFTAKEN ATDATEDCONTINUED." THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGEOFPAGES." 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.

SWORN STATEMENT

DA FORM 2823

SUPERSEDES DA FORM 2823, 1 JAN 68. WHICH WILL BE USED.

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TNESSES:	to admini	bacilbed and sworn to before me,	a person a horized by law
	Sulto admini	bacilbed and aworn to before me.	a person a horized by law
	to admini	bacilbed and sworn to before me,	a person a horized by law
	to admini	bacilbed and sworn to before me,	s person a horized by law Ay 2 04 Trag
	to admini	bacilbed and sworn to before me,	s person's horized by law Ay , 2 O'
	to admini	bacribed and swern to before me, ster cathe, this 23 day of Camp War Ear le	a person a horized by law
GANIZATION OR ADDRESS	to admini	bacribed and awarn to before me, ster caths, this 27 day of the Camp War Earle	a person a horized by law Ay ,2 Trag 178-11
GANIZATION OR ADDRESS	to admini	bacribed and swern to before me, ster cathe, this 23 day of Camp War Ear le	a person a horized by law Ay ,2 Trac 178-11
GANIZATION OR ADDRESS	to admini	bacribed and swern to before me, ster cathe, this 23 day of Camp War Ear le	a person a horized by law ay 2 178-11 178-11 178-11 178-11 178-11 178-11 178-11 178-11 178-11 178-11
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GANIZATION OR ADDRESS GANIZATION OR ADDRESS	to admini	SA (Typed Name of Person Administrative Country Count	s person a horized by law ay , 2 OH L78-(1) Ministering (m) CM)
GANIZATION OR ADDRESS GANIZATION OR ADDRESS IALS OF PERSON MAKING STATEMEN	to admini	Ster caths, this 23 day of the Camp Way Ear le (Typed Name of Person Administration of the Camp Way Ear le	s person a horized by law ay , 2 OH L78-(1) Ministering (m) CM)

FOR OFFICIAL USE ONLY DODDOACID-005181 EXHIBIT - O

For use of	SW this form, see . 30-45; the proj	ORN STATEME	NT s of The De C	nief of Staff for Personne	
LOCATION Camp War		DATE 23 May 04	TIME 12:20	FILE NUMBER	
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D: 5.4.	67C-1, B	6-1			
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A: 110	detainees combati			·	7
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∧	tainees resist at	any time	•	heir prepare	7.0
tor transpor 1: No. 1: Was it no	t or loading 7 ecossary at any t	ime to for	cible incor	the detaine	POL 7
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67C-4,664

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		WOL INDUCEN	67C-46	6-4
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NESSES:			muse of Person Making Staten	n 1
1123029.		Subscribed an	f nd awom to before me, a person	a horized by law
	· · · · · · · · · · · · · · · · · · ·	to administer ceths,	this 23 day of How	2 04
		atcamp	War Eagle, Iraq	
SANIZATION OR ADDRESS				b7c-1,66
			majore of Person Admir 199	£ 5,
				670-1,
		5.4		0 / /
		Туре	ed Name of Person Administering	`ui)
SANIZATION OR ADORESS				
SANIZATION OR ADDRESS		Art	136 UCMJ	
SANIZATION OR ADDRESS		Arr	Authority To Administer Oaths	,
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EXHIBIT 21

Fo		ORN STATEME ponent agency is Office		ief of Staff for Repaymen	4
LOCATION	Wartagle, Iraa	DATE 23 May 04	TIME 12-3	FILE NUMBER	
	T NAME, MIDDLE NAME	SOCIAL SECURI	TY NUMBER	GRADE/STATUS SPC /40	67-40
ORGANIZATION C	S Cav. ICD, Camp U	DOVE SOL I	0137	- 04 - CIV8	99-817
14.10,-2		1 me Halland	<u>.</u>		
1 On the	7th May 2004	detainers)	cought inte	
the deta		2030 while		<u> </u>	1 75
men th	not were brought	- in were	in goo	d hralts 1	and
Not vec	L 11 a == 1	were put		cells and	
naheara	TO THE LUICS OF			om 0200-6	<u> </u>
CPT Fram	a VIZ CAV . PFC	and a	earigation	Delainee.	They or
PFA P	and CPL	took ove	- 13		4.66-4
Q: 54	676-1.6		· 150- 12	CON COL	1,00
4: SPC	b7€-4,6	-			
	he detainees compl	ain of any	injunes w	hite you were	00
Shitt?		<u>;</u>	· · · · · · · · · · · · · · · · · · ·		
4. NO				lataliana T	
1 No	o notice any preexi		<u></u>		
A: No	the detainees com	· .	y .		hitt T
Q: Did you	assist in preparing-	the detain	iees for t	ransportT	
A. No			1 4	<u> </u>	
4: No you	have any thing you	wish toa	dd to you	statemen	
1/18	END OF STATE	EMENT		674-4,66	-4_
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PHOTOGRAPHIC PACKET

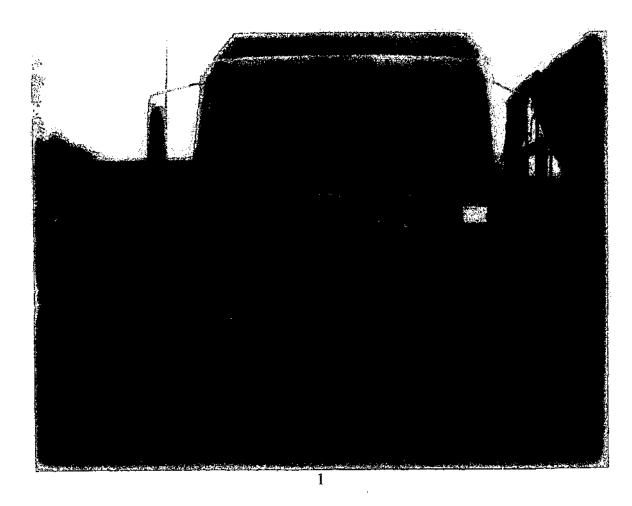
0137-04-CID899-81702

NUMBER DESCRIPTION OF PHOTOGRA	OF PHOTOGRAPH	NUMBER
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1.	Photograph depicting front of LMTV used to transport detainees.
2.	Photograph depicting rear of LMTV used to transport detainees.
3.	Photograph depicting mark on Mr. wack.
4.	Photograph depicting mark on Mr. Barbard back. Photograph depicting mark on Mr. Barbard back with scale.
5.	Photograph depicting mark on Mr. Barbard back with scale. Photograph depicting mark on Mr. Brown forehead.
6.	Photograph depicting mark on Mr. Photograph depicting injury on Mr. Photograph depicti
7.	Photograph depicting bruise on Mr. Pright temple. 67466-4
8.	Photograph depicting injury on Mr. Pleft calf. 676-4, 66-4
9.	Photograph depicting injury on Mr. left calf with 67C-466-46 scale.
10.	Photograph depicting Mr. 676-4766-4
11.	Photograph depicting swollen area of right collarbone of Mr. 61c-466-4

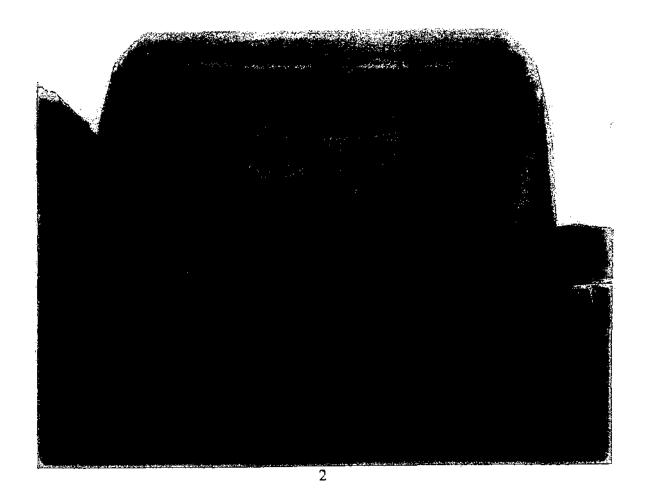
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Exhibit 24 00.97



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11. EXH. BIT 25

CRIME LAB EXAMI For use of this form, see AR 19: United States Army Crimin	5.6" the proponent agency is the	37-04-CID	199-81702
	FROM: (Include Zip Code)	RECEIVED	RETURNED
TO: (Include Zip Code) Director US Army Criminal Investigation	Special Agent-in-Charge 38th MP (CID)	REGIS MAIL	REGIS MAIL
Laboratory 4553 N 2d St	22 nd MP BN (CID) APO AE 09342	RY EXP	RY EXP
Forest Park, GA 30050-5122	bre-1,66-1	HAND	HAND
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Imagery and Technical Support		EVIDENCE	RECEIPT
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1. CONTRIBUTOR CASE NUMBER 0137-04-CID899-81702	SA SA	DNVT 551-	676-1,66-1
4. SUSPECT(S) (Last, first and middle name	e(s))		
576-	5,66-5		
5. VICTIM(S) (Last, first and middle name(s			
674-4,	664		
	7. ONE COPY OF EVIDENCE RECEIPT	8. OTHER EVIDENC	E PREVIOUSLY
6. TYPE OF OFFENSE Aggravated Assault	ENCLOSED WITH EVIDENCE	SUBMITTED ON THI	S CASE
	Ø YES □ NO	☐ YES	MO
9. IF 'YES' IN ITEM 8, LIST OTHER SUSP	ECT(S), DATE SUBMITTED, UNIT CASE AN	D LABORATORY REFE	RRAL NUMBER(S)
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	10 EVIDENCE SUBMITTED	<u> </u>	
a. EXHIBIT	b. DESCRIPTION OF EX	HIBIT	
1 Boots (Item	# 1. Document # 401-04)		
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Poota (Ttom	# 4 Document # 491-04}		
5 Compact dis	c containing photographs	of marks found	l on victim.
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EXHIBIT

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	10. EVIDENCE SUBMITTED (Continued)
a EXHIBIT	b. DESCRIPTION OF EXHIBIT
	01.37-04-CIL699-81702
11. EXAMINATION(S	S) REQUESTED (Briefly furnish any information or instructions that might assist the laboratory in examining, evaluating or
SYNOPSIS: (see a Latent Print Division Attempt to identify w	ttached Initial Report 0137-04-CID899-81702) 1: Request your office EXPEDITE examination of Exhibits 1 through 4, and compare with Exhibit 5.67C whether the latent impressions. Expedited examination is requested that is of detained investigations.
Please conduct any	other examinations you deem appropriate.
	Evidence above has not been examined by another expert in the same scientific field
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Special Agent	676-1,66-1 18 May 04
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EXHIBIT 5/2

]	E.	VIDENCE/PROPER [®] - A STODY D	OCUMENT	0137-04-CID879
		in k timm see AR 145-45 and AR 195-5, the proper projection Command		80 REPORT CID ROLLINESS 81702
1	UNIO ACTIVI		ESENTION /	
2<	SMYA	(1D) 676"	Bachded ADDRESS Mediane Zip Confe-	L reig
		O TITLE OF PERSON FROM WHOM RECEIVE	4 Co Z-5 Ca	-
_'	OWNER /	GRANNE OWILL ACE Z-5 CO	4 C 2 - 5 CA	- I- Tura
	7 2 CHER	Complian Engly, Ivag	, 627-04-5-1-1	
		HERE OBTAINED	REASON OBTAINED	TIME DATE OBTAINED
		ox, coms room, ACE, ESEA	Evidence	0925-0940! 16 Hay CLI
fili-M Sc	LGUANTITY	cinciade mode	DESCRIPTION OF ARTICLES It, serial number, condition and unusual ma-	ks or scratches
<u> </u>	17410	Boots, Brown incolor, leather	and doth in construction	11 3120 177 a +h
{ '	1 1 -	insolve bearing "AIS 1-9	1 187 10505 inside Tord	west both boots, Boots raken
	<u>:</u>	In used and worn zondition.	Haved for Identification ((FID) on topedist of tonge of
		both bootswith 0975		
~ Z	1 pair	Boots breezes in color leather	and clothin construction.	size 14R, with insole?
	,	MEID ontop edge of tongue of 1	ive tangue at both boots. Be	6 tley 04.
·3	Ipair	Boots brown in color leather on bearing manufacturers label inside	idelath in construction, siz	e 10,5 kd, with in solos
		bearing manufacturers label inside	rangue of both both with	PILMONEUR OF TO EXECUTE
		Of both boots.	indicate in the party	DIL Hay 64 on top edgref tonger
7.	1,79.0		and cloth inconstruct	ion size 12.5 R with
4		lusdes bearing manufacturers le	bel inside rop of legal Bast u	U:+6 "500, 376, 6978", 12341756"
	ļ	boots, brown in color leather insoles bearing manufacturers le Doors rateur in clear and works constant to the boots of	11101. MEID 0940 161	ley of an topeds cartons ocat
		In Garage		
	İ	LAST IT	F CUSTODY	
THEM	DA1F	Th	DECCUSED DAY	PURPOSE OF CHANGE
NO		RELEASED BY 676-3,66	1 116-1.66	OF CUSTODY
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1-4	play	NAME OF THE PROPERTY OF THE PARTY OF THE PAR	NAME, DROUGESTANDIGEST	- Holinstadian
' '	04	54	5A 670	-1/12
· ·		SIGNATURE	SIGNATURE	
		672-1,66-1		
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		NAME, GRADE OR TITLE	NAME GRADE OF THE	
DAFOR		Replaces DA FORM 4132 1 Aug 24 and	1 OC ATION	DOCUMENT 401-04
140	76	DA FORM 4137-P Privacy Act Statement 26 Sep 25 Which are Obsolete	LOCATION	- amer
		end fitt	ICIAL USE ONLY	EXHIBIT_7]
		PUR UIT	Parating man	EXMEN

DATE: 13 MAY 2004

FROM: SAC 38TH MP DET (CID)(DSE)

TO:

DIR, USACRC, USACIDC, FT BELVOIR, VA

CDR, USACIDC //CIOP-ZA// CDR, 22ND MP BN (CID) //OPS// CDR, 3D MP GRP (CID) //OPS//

PMO, 1CD //PM// SJA, 1CD //SJA//

SUBJECT: CID REPORT OF INVESTIGATION-INITIAL - 0137-04-CID899-81702-5C1J/5Y2E1

DRAFTER: SA RELEASER: SAC b7e-1,66-1

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1. DATES/TIMES/LOCATIONS OF OCCURRENCES: 07 MAY 2004/0845 – 07 MAY 2004/1030; BETWEEN CAMP WAR EAGLE AND CAMP CUERVO, BAGHDAD, IRAQ

2. DATE/TIME REPORTED: 09 MAY 2004, 1100

3. INVESTIGATED BY: SA

SUBJECT: 1. SGT M; BLACK; A CO, 2/5 CAV, 1CD, CAMP WAR EAGLE, BAGHDAD, IRAQ; CT; (FORT HOOD, TX) [AGGRAVATED ASSAULT]

67e-5,66-5

 VICTIM: 1. , CIV; CAPTURE TAG# M; OTHER; HAI BETOOL, BAGHDAD, IRAQ; ZZ; AGGRAVATED ASSAULT

CIV; CAPTURE TAG# M; OTHER; BAGHDAD, IRAQ; ZZ; (NFI) [AGGRAVATED ASSAULT]

67E-4,66-1

6. INVESTIGATIVE SUMMARY: THE INFORMATION IN THIS REPORT IS BASED UPON AN ALLEGATION OR PRELIMINARY INVESTIGATION AND MAY CHANGE PRIOR TO THE COMPLETION OF THE INVESTIGATION.

THIS IS AN "OPERATION IRAQI FREEDOM 2" INVESTIGATION.

ON 09 MAY 04, THIS OFFICE WAS NOTIFIED BY MAJ HEADQUARTERS, 1-12 CAV, 1st BRIGADE (BDE), 1st CD; CAMP WAR EAGLE, BAGHDAD, IRAQ THAT TWO DETAINEES RECEIVED INJURIES WHILE BEING TRANSPORTED FROM CAMP WAR EAGLE TO CAMP CUERVO.

PRELIMINARY INVESTIGATION REVEALED ABOUT 0845, 07 MAY 04, TWO
DETAINEES, MR. AND MR. WERE BLIND FOLDED AND
PLACED INTO HANDS FLEXICUFFED BEHIND THEIR BACK AND LOADED
ONTO A LIGHT MEDIUM TACTICAL VEHICLE (LMTV) TRUCK TO BE
TRANSPORTED FROM CAMP WAR EAGLE TO CAMP CUERVO. SGT
WAS THE ONLY GUARD IN THE BACK OF THE TRUCK WITH
MR. AND MR. WHEN THEY DEPARTED CAMP WAR EAGLE. 67C- 66C-

ABOUT 1030, 07 MAY 04, THE TRUCK ARRIVED AT THE 1ST BDE HOLDING FACILITY, CAMP CUERVO, BAGHDAD, IRAQ AND THE DETAINEES WERE BROUGHT INTO THE FACILITY FOR PROCESSING. SPC.

HSB, 1-82 FIELD ARTILLERY (FA), CAMP CUERVO, BAGHDAD, IRAQ BROUGHT THE TWO DETAINEES INTO THE FACILITY AND RELEASED THEM FROM THE FLEXICUFFS AND BLIND FOLDS AND STARTED THEIR INPROCESSING WHEN HE NOTICED THE DETAINEES HAD BRUISES AND BLIND FOLDS AND MR HAD A LARGE BRUISE ON HIS BACK AND MR COULD NOT LIFT HIS RIGHT ARM AND HAD WHAT APPEARED TO 672.46 64

ON 11 MAY 04, THIS OFFICE INTERVIEWED MR WHO PROVIDED A SWORN STATEMENT DETAILING THAT WHILE HE WAS IN THE BACK OF THE TRUCK TRAVELING TO CAMP CUERVO THE GUARD ATTACKED HIM BY PULLING HIM BY HIS HAIR OFF OF THE BENCH AND THEN STRUCK HIM SEVERAL TIMES CAUSING HIM TO SUSTAIN A FRACTURED COLLAR BONE.

ON 11 MAY 04, THIS OFFICE INTERVIEWED MR WHO PROVIDED A SWORN STATEMENT DETAILING THAT WHILE HE WAS BEING TRANSPORTED THE GUARD IN THE TRUCK HIT HIM ON HIS FOREHEAD, CHEST, BACK AND PUSHED HIM ONTO THE FLOOR WHERE HE HIT HIS KNEE.

ON 11 MAY 04, THIS OFFICE INTERVIEWED 1LT BATTALION SURGEON, SHEET BATT

CONTINUING EFFORTS ARE BEING MADE TO LOCATE AND INTERVIEW THE TWO GUARDS ON SHIFT AT THE HOLDING FACILITY, CAMP WAR EAGLE, BAGHDAD, IRAQ THE MORNING THE DETAINEES WERE TRANSPORTED.

RANSPORTED.

REQUEST A USACRC NAME CHECK BE CONDUCTED ON SGT

INVESTIGATION CONTINUES BY USACIDC.

- 7. COMMANDER ARE REMINDED OF THE PROVISIONS OF AR 600-8-2 PERTAINING TO SUSPENSION OF FAVORABLE PERSONNEL ACTIONS AND AR 380-67 FOR THE SUSPENSION OF SECURITY CLEARANCES OF PERSONS UNDER INVESTIGATION.
- 8. CID REPORTS ARE EXEMPT FROM AUTOMATIC TERMINATION OF PROTECTIVE MARKING IN ACCORDANCE WITH CHAPTER 3, AR 25-55.

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		DUENCE NUMBER 17-04-CID044-8170	2
DATE NOTED	PLANNED ACTIVITY	SUSPERSE DATE	DATE
9 May	ID/Intv guards on duty at War Eagle Detention Facility		23 May
	At time of release ID/intv both detainees		11 May
	ID/Inty receiving guards at Cuervo Detention Facility		11 May
	ID/Intv receiving guards at Cuervo Detention Facility		11 May
	ID/Intv CPT ID/Intv SGT	 	11 Hay
11 May	1D/Intv 1LT		11 May
	IDAnty CPT	·}-	11 May
-	ID/Inty SGT 196-4 ID/Inty CPT 196-4		11 May
	ID/Inty CPT		16 May
	ID/Intv CPL 57 -4, 664 ID/Intv SGT 57 -4, 664 ID/Intv SPC 57 -4, 664 ID/Intv MSG 57 -4, 66-4		Z. Hay
	1D/Intv SGT 4, 664		9 May
	ID/Intv SPC		9 May
	ID/Intv MSG		9 May
	ID/Photo/FP/Intv SGT		9 May 14 May
Z4 Hay	Close FINCE;		
	·		
Circle Last N		Last Nane	Date Issued
V W	V W V W V W V W		
V W			
Photograph /ilinge	officer Compileted Action print subjects NCIC entry on stolen prop	<u>_</u>	anglists d
Film submitted for	contact sheet Contact sheet submitted for p	shotos	
CPT .SI CPT .S2. MAI O I-1	heity / Person 4 6 5 Percon Number A 1-82 17 531- 2 Cav. 15-6 Officer 531 551	ACTIVITY	1 divisiony 5 day days 5 day days 10 day days 15 day days
	ACTION WANTED	REPOUNDED FINALS FINALS MALS	15 diffy digo 30 work days 30 work days

TIME DATE AND AGENT

L10-166-1

17e-8,66-1

1100,09 May 04 /

1330, 09 May 04

BASIS FOR INVESTIGATION: About 1100, 09 May 04, this office was notified by MAJ

Headquarters, 1-12 Calvary, 1" Brigage of Carvary Division (CD), Camp War Eagle, Baghdad. frag that two detainees received injuries while being transported from Camp

676-46

War Eagle to Camp Cuervo.

bre-1,66-1 About 1330, 09 May 04, SAI interviewed MAJ who related

he had conducted a AR 15-6 investigation into the inches that it be had conducted a AR 15-6 investigation into the inches that it be seen detailed were assaulted by SGT 67C-5786-5 appeared the two detainees were essaulted by SGT A Co 2/5 Calvary, 1st CD, Camp War Eagle, Bagridad, Iraq while he was quarding them in transit from Camp War Eagle

provided a copy of the 15-6 investigation, 6 7 to Camp Cuervo. MAJ which also contained statements from the detainees.

1500, 09 May 04

1640, 09 May 04 /

67C-1+66-1

1750, 09 May 04 /

676-1,66-1

1755, 09 May 04

678-1,66-1

1900, 09 May 04 696-1,66-1 About 1435, 09 May 04, SA inter

C Battery, 1-82 Field Artillery (FA), Camp War Eagle,

Baghdad, Imaq who was the driver of the truck. SGT provided a 672-466-4

sworn statement detailing the events that happened on 07 May 04. (See

Sworn Statement for details)

About 1500, 09 May 04, SA interviewed MSO HHC, 2/5 Calvary, 1st CD, Camp War Eagle,

r transport. MSG 67C-2,66 Bachdad Iraq who released the detainees to SGT

provided a sworn statement detailing the events that happened on 672-3,66-3 07 May 04. (See Sworn Statement for details) 676-5,66-5

About 1640, 09 May 04, SA advised SGT on this legal rights which he waived and was interviewed until 1700 when he invoked his right to counsel and the interview was stopped. (See AIR for Details)

670-1,66-1 About 1750, 09 May 04, SA interviewed SPC

A Co, 115th FSC, Camp War Bagle, Baghdad, Iraq who was provided a sworn statement detailing 670 66-9 the TC in the truck. SPC what happened on 07 May 04. (See Sworn Statement for details)

About 1755, 09 May 04, SA interviewed CPL C Battery, 1-82 FA, 1st CD, Camp War Eagle,

Pelated there was no formal schedule of who had duty and but because there were several units that should be the several units that Baghdad, train regarding who was on guard duty the morning of the incident. he was unsure who had it because there were several units that share that detail.

bre-1,66-1 674-466-4 coordinated with MAJ ho related he could not find the guards that were on duty that morning at the detention facility, but he would get with the commanders of all three units that pull guard duty and try to determine who they were over the next couple days.

PAGE 1 500 2

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AGENT'S ACTIVITY SUMMARY Coastrol Number 9-81702 About 1915, 09 May 04, SA conducted an examination of the Light 1915, 09 May 04 676-66 676-1,66-6 Medium Tactical Vehicle (LMTV), Bumper number which has been used several times since the incident. A crime scene examination was not conducted due the scene being contaminated and was not in the same configuration it was on that day. SA exposed photographs of the scene utilizing a Nikon Coolpix digital camera. Case file to the SAC for review and log in. C/A scheduled trip to complete 1000, 10 May 04 leads for 11 May 04. 672-1 briefed CP1 1st Brigade SJA on this case to date. 1130, 10 May 04 \mathbf{CPI} requested we continue to keep them informed. CPT Camp Cuervo at 1430, 11 May 04, as the PMO related they did not have a 6 20-3, 640 convoy available until Friday. 14 May 04 670-1,66-1 614-2, 66-2 6K-41661 attempted several times to contact CPT 2000, 10 May 04 Detainee Facility, Camp Cuervo, Baghdad, Iraq was informed he was not 1070-1,66-1 there, left several messages for him to contact this office back.

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PAGE J

_	fulion 195-1)	0137-04-CID899	
TIME, DATE, AND AGENT		MARY OF INVESTIGATIVE ACTIVITY	
00, 1 May 04,	SAC REVIEW:	ļ	
676-1.66-1		terview the following soldiers.	
ls.	2. 1LT		
		(Camp Cuervo) 676-466-4	
	4. SFC	amp Cuervo) 676-466-4	
	5. SGT CC	mp Cuervo) 676466-4	
	6. SGT	676-41667	
	7. SGT	mp Cuervo) 676466-4 676466-5665 Camp Eagles) 676-5665	
	8. SPC	Camp Eagles) 676-4,66-4	
	9. CPT	70-4,66-4	
		78-4,66-4	
	10. CPL 6	70-4706-4	
	11. SFC 6	724,66-4	
		of the prison regulation/sop	
	pertaining to	prisoner.	
	13. Collect	boots as evidence if there were by	
	, an impression	tere on any or the decarnees.	
	14. Determine who	was the last person to see the	
	detainees.		
		y boot impression with scale and	
	without scale		
	Without state	n we interview the doctor we get him	
	16. Make sure whe	il we interview the about we get him	
	or her to pro	vide us with an opinion on what type	
		he detainees sustained.	
	17. Brief SJA on	all finding.	
	18. Brief Operati	ons Officer.	
	19. Continue to f	ollow leads as they develop.	
	20. Update me on	this case every 5 days.	
	21. This is a pri	ority investigation, therefore, I	
	avenuet won to	etay on top of this.	
	22. To SA an	d SA for completion. 676-1,66-1	
	227 10 011		
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PREVIOUS EDITIONS OF THIS FORM WILL BE USED UNTIL EXHAUSTED 1000 1

1530, 11 May 04 J

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Statement for details)

PAGE 4

signing them over to SGR on 07 May 04. (See Sworn

672-1,567

About 1530, 11 May 04, SA interviewed CPT

AGENT'S ACTIVITY SUMMARY (CID Regulation 195-1) TIME DATE, AND AGENT OIC, Battalion Holding Facility, Camp Cuervo, Baghdad, Iraq who related that on 07 May 04, SFC had notified him that a 674-1,66-1 couple detainees that were brought into the holding facility had injuries to them. 675-1,66-1 676-4.66-About 1600, 11 May 04, S. 1600, 11 May 04 Battalion Surgeon, HSB, 1-82 FA, 1st BDE, 1st CD, Camp Cuervo, Barhdad, Iraq who provided a sworn statement detailing the 676-1,66-1 examination of both detainees. (See Sworn Statement for details) About 1605, 11 May 04, SA interviewed SGT 1605, 11 May 04 / 678-1,66-1 details) bx-1,66-1 HSB, 1-82 FA, 1CD, Baghdad, Iraq who provided a About 1610, 11 May 04. SA 1610, 11 May 04 sworn statement detailing his knowledge of the incident. (See Sworn 670-1,66-1 Statement for details) 676-1,56-1 67c-4,66-4 About 1730, 11 May 04, SA interviewed Mr. 1730, 11 May 04 CIV, 1st BDE Holding Facility, Camp Cuervo, Baghdad, Iraq who provided a sworn statement detailing what happened to himself and his uncle b76-1,667 on 07 May 04. (See Sworn Statement for details) 674-166-1 About 1740, 11 May 04, SA Baghdad, Iraq who provided a sworn 670+4,64 1740, 11 May 04 statement detailing what happened to himself and his nephew on 07 May 04. 67e-1,66-1 (See Sworn Statement for details) Helicopters never arrived to pickup agents at 1900, contacted 4th BDE LNO <u>2000, 11 May</u> 04 who related the helicopters landed early picked up two individuals and left. He related he would try get another chopper out tonight if not it would be 67e-1,661 Comp Cuervo until 1900 tonight 12 May 04. SA tomorrow morning. 0900, 12 May 04 coming to Camp Cuervo until 1900 tonight 12 May 04. SA coordinated with 1-82 FA's battle captain who related they could not get us a 67e-1, 66-1 convoy until 13 May 04 to North Victory, but they had a convoy escorting come back to Cuervo. SA contacted the 1CD PMO who related all the MP patrols were on missions they would be there about two hours and the MP patrols were on missions, they would not have anyone to pick us up until maybe 13 May 04.

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AGE S

AGENT'S ACTIVITY		Control Namber 01 3 7 - 0432 04 1 1999 9 - 8 1 7 02	
(CID Regulation	. (et	BERGMARY OF INVESTIGATIVE ACTIVITY	
Lango		Control of Marian	-166-1
1080, 12 May 04	SA SSESS and SA		E-1,44
A STATE OF THE STA		ニース・ストール 一種 かんかき 大便に連っては重要されています。 カース・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・	
1100. 12 Nay 04	About 1100, 12 M		4664
	And the second of the second o	HHC, 1-12 CAV, 1CD, Camp War Bagle, Baghdad,	
67E-1,66-1	THE WAY STATE OF	a Sworn Statement detailing what medical he gave one of	
676-1100		5 May 04 and that the detainee had no other injuries at that	
그 그 그 그런 그 가게 하지만 그렇게	dines that he could		
		676-6656	4664
1.135, 12 May 04	About 1135, 12 M	THE STATE OF THE S	12 OP 1
	S	1-17 CLA ELL LAS CALASTON COMPARATOR	
67e-1,66	Eagle, Baghdad, Ir	an who related he was informed by the modic that one of	
6/2	the detainees had b	peen seen for an upset stomach: IL remain and related, letelnees himself.	_1181 W
	he never seen the d		706-6
		676466	·
1200, 12 May 04	Between 1100-120	0, 12 May 04, SA seement coordinated with the First	
	Sergeant for C Bat	tery, 1-82 FA, Camp War Bagle, Baghdad Iraq who	
676-1,66-1	related his battery	is tasked with providing guards at the holding facility, but	
676		soldiers were pulled off because of a mission and another	
্য		em until around 1000, 97 May 04. Coordinated with the	
	orderly room for A	Co, 2/5 CAV the First Sergeant and CO was not available	
		O related they only provided one soldier for a detail on 07	رمرستو ۔۔۔!
	May 04 and that we	as SGT transporting the	72-706
į		ated with the XO for B Co, 2/5 CAV who related they did	
	not provide any sol	ldiers for guard on 07 May 04 that he had knowledge of.	
		C Co, 2/5 CAV, First Sergeant who related they did not	and com
		a guard shift on 97 May 04. SA	C (1040.C
•	with SGT	HHC, 115° FSB, 1CD, who related	مزئز لا يا
			c-3,66
**		them via radio and was informed they did not have	
	anyone on guard di	uty that morning.	
	6743666		21.466
1215, 12 May 04	SACCOORD	nated with MAJ who related he knew that it was	14-1705
		ldier and that he had coordinated with all the units with	
67C-1.66-1	negative results fin	ding the guards for that morning.	
	616-666-6	and the standard of the standa	
1220, 12 May 04		nated with the A Co, 2/5 CAV orderly room who related	
111-1		d First Sergeant were not available. Coordinated with the	
676-1,66-1		obtain his boots as evidence, the CO related SGT	5,66-5
· · · · · · · · · · · · · · · · · · ·		meeting with trial defense today and he did not know 674	
		back. Briefed the CO on this investigation to date.	-176 ->
1	Milen de Modia os	- · · · · · · · · · · · · · · · · · · ·	
1000 1014 04	SA and SA	convoyed back to Camp Cuervo. 57C-	1,66-1
1230, 12 May 04	Statement 25	The state of the s	,
676-1,66-1			
7 7 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1	ı	

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AGENTS ACTIVI	TY SUMMARY Control Number 0137-04-CID899-81702	
TIME, DATE, AND AGENT	SUMMARY OF INVESTIGATIVE ACITIVITY	
1900, 13 May 04	Received file from SAC. 1 — Will update AIR 2, 4 — Will complete remaining leads ASAP 3 — Typed IP 5 — Discussed with SAC, understood 6 — Discussed with SAC will retain until requested by OPS	
0830, 14 May 04 /	Received name check results regarding SGT which revealed no be derogatory information. Coordinated with MAJ Executive Officer, 2-5 Cav, who related SGT boots would be taken and provided to this office 676 upon arrival 16 May 04.	C-3,66".
1955, 14 May 04	related SGT boots would be taken and provided to this office 676 upon arrival 16 May 04.	-5,66 -2 -5
0925 thru 0940, 16 May 04	67	-4,66
0955, 16 May 04 / 672-1, 66-1 1015, 16 May 04 /	Interviewed ILT who rendered a sworn statement detailing his storage of SGT who rendered a sworn statement detailing his observation regarding the storage of SGT boots. Interviewed 1LT who who rendered a sworn statement detailing his knowledge.	466-4
676-1,66-1	observation regarding the storage of SGT boots. 672-516 Interviewed 1LT who who rendered a sworn statement detailing his knowledge of the condition and treatment of the detainees.	6-5 7e-4,66
1105, 16 May 04 / 672-1,66-1 1620, 16 May 04 /	of the condition and treatment of the detainees. Interviewed SPG who provided a clean copy of his sworn statement (57)	
67C-1,66-1 1245, 17 May 04	detailing his knowledge of the condition and treatment of the detainees. Released evidence to evidence custodian.	
67C-1,66-1 1400, 17 May 04 67C-1,66-1	Briefed CPT Trial Counsel, SJA, regarding the details of this 674 investigation. CPT requested copies of statements in order to determine charges.	3,66-3
1830, 17 May 04	Briefed SAC regarding evidence submission. Will send to Latent Prints and Imagery and Technical Support with digital images of injuries.	
0930, 18 May 04	SAC advised to prepare file for OPS review.	
1000, 18 May 04	Prepare DA Form 3655 and update file for review.	
1100, 18 May 04 67C-1,66	Submit Lab Request.	

В

CID FORM 28

(CID Regular TIME, DATE, AND AGENT May 04		SUMMARY OF INVESTIGATIVE ACTITIVITY
	·	
	Working leads 0099-0	04-CID899 and 0162-03-CID899 at FOB St Michael
674-1, 66-1 May 04 676-1,66-1	Working leads 0157-0	
100,21 May 04		on guard duty on the morning of 7 May 04 and have them
30,23 May 04	Briefed CPT provided copies of sw	SJA, regarding the details of this investigation and worn statements.
725, 23 May 04 J	المسالم المساور المساو	who rendered a sworn statement detailing his 67C-
205.23 May 04 J	Interviewed CPL knowledge of the deta	who rendered a sworn statement detailing his 676-6 aince's condition.
220, 23 May 04 /	Interviewed PV2 knowledge of the deta	who rendered a sworn statement detailing his 67e-4 ainee's condition.
230, 23 May 04 J		i
250, 23 May 04 1 678-1,66-1	Interviewed PFC knowledge of the deta	who rendered a sworn statement detailing his 676-
300, 23 May 04 676-466-1	Briefed TC regarding determine if close Fin	g details of this investigation. Directed brief SAC and naiC
230, 24 May 04	Briefed SAC regardin	ng details of this investigation. Directed close FinalC.
67C-1,66-1 050,24 May 04	Coordinated with CPT believe SGT	The Committed the offense of Aggravated Assault.
230 thru 1630, 25 May 04	Working leads Draft I	INI for 0165-04
900 thru 2350, 25 May 04	Prepare file for close	and Draft FIN(C)
800 <u>, 26 May</u> 04	To Det CDR for revie	ew.

26 May 04 678-1,66-1

Reviewed:

- 1) No MACOM listing on Final Report.
- 2) There is no offense code SY2E1 there is SY2E, which is cruelty of subordinates. Are we also saying he committed the offense of Cruelty or Mistreatment under Art 93? If so that offense needs to be added to the Subject/Victim blocks and Statues.
- 3) Not Attached is retained in the Evidence Room.
- 4) Only thing that is retained pending adjudication would be statements obtained form the subject. Since a statement wasn't obtained everything is forwarded to USACRC.
- 5) Time on AIR for interviews should be the same time on the statements.
- 6) Exhibit 12 says English language translation of statement. Where is the Arabic language statement?
- 7) AIR 1740, 11 May 04, is that the interview of victim #1? If so the name is different in the final.
- 8) ROI # all documents, notes and notes folder.
- 9) Why is the statement of in the file?

676-4,664

- 10) Were X-rays taken? If so why didn't we obtain copy of same.
- 11) Does SJA need anything else for a successful prosecution?
- 12) Following people were mentioned in statements and not interviewed: The two interpreters, SFC SPC and SPO LT CPT

67C-3,66 Names also mentioned in statements in 15-6 which were not interviewed: MAJ CPT and SFC MAJ MAJ

I take it since you are drafting the final the remaining interviews are Final C leads?

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CID FORM 28 LOCT 80

AGENTS ACTIVI (CID Regular	
TIME, DATE, AND AGENT	SUMMARY OF INVESTIGATIVE ACTIVITY
0830, 28 May 04	Received file from Det CDR. 1,3,4,8 — Understood 5 — Will confirm statement times with AIR 6 — Will coordinate with TC regarding statement 7 — Victim #1 last name is 67C 4664 9 — Statement placed in fin 10 — No x-rays due to detainee not admitted to CSH 11, 12 — SJA only requested lab results for his case, remaining names identified by Det CDR were mentioned in passing in sworn statements and were not identified as having contact with the incident in question and will be Fin(C) as SJA has stated nothing further was required of this office.
1000 thru 1645, 28 May 04	Reviewed and Corrected and prepared Draft Fin(C)
1630.28 May 04 67C-1,66-1	Coordinated with TC regarding details of Fin(C).
1850, 28 May 04	To TC for review.
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AGENTS ACTIV	ITY SUMMARY 1800 195-1)	Control Number 0137-04-CID899-81702	
TIME, DATE, AND AGENT	7	IMMARY OF INVESTIGATIVE ACTIVITY	
2045, 29 May 04	Received file from TC.		
2100,29 May 04 67C-1,666	To SAC for review and d	ispatch.	
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CID FORM 28

PREVIOUS EDITIONS OF THIS FORM WILL BE USED UNTIL EXHAUSTED



Control Nataber AGENTS ACTIVITY SUMMARY 0137-04-CID899-81702 (CID Regulation 195-1) TIME, DATE, AND AGENT SUMMARY OF INVESTIGATIVE ACTIVITY Received file from SAC. Will correct as noted. 1730, 30 May 04 15701661 1745, 30 May 04 Made corrections to FIN 672-466-1 1930, 30 May 04 To SAC for review and dispatch. 676-1,66-1 re unt b 678-1,66-1 3. To DET communder for distro a strings of Distro completed 8 Jun 04 676-1,66-1

CID FORM 28

PREVIOUS EDITIONS OF THIS FORM WILL BE USED UNTIL EXHAUSTED

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Referred to:

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

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

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| i, Social Security: , | !_            |                                                                                                                | 59. Grade       | Rank:             |                                       | 60. MC                | :                 |         | 61. Uni                                 |                               |                          |                 |                    |                              |
| l. City:              |               | 63. State:                                                                                                     |                 | 64. ZIP/          | APO:                                  |                       |                   | 63.     | Phone:                                  | Wk;                           |                          | . н             | ha:                |                              |
|                       |               | }                                                                                                              |                 |                   |                                       |                       |                   |         |                                         |                               |                          |                 |                    |                              |
| . Offense Code:       | 67. UFC:      | 64. Officeso                                                                                                   | C000:           | 69. URC           | 7                                     | ), Öffhise (          | 28 <b>6</b> 8:    |         | 71, DF                                  | 72                            | Officia                  | Code:           |                    | 3. UPC:                      |
| dephoos               | ETS           | E.J                                                                                                            | 07              | PCS/DER           | <b>65</b> :                           | ·: · ·                |                   |         |                                         | view 517                      | RT:                      |                 |                    |                              |
| ace of Interview:     |               | Acc                                                                                                            |                 | <u> </u>          |                                       |                       |                   | Date/   |                                         | aviow KNI                     | <del>):</del>            | Time            |                    |                              |
| isposition:           |               | <del></del>                                                                                                    |                 |                   |                                       |                       | I                 | 1       | Datte:                                  |                               |                          | Time:           |                    |                              |
|                       |               | _                                                                                                              |                 |                   |                                       |                       |                   |         | NE                                      |                               |                          | •               | •                  |                              |
| . Cetegory:           | 75. T         | уре:                                                                                                           | 76. R±<br>Yes:□ | No:               | 77. V                                 | ilgo:                 | 78, in            | miter:  |                                         | Polic                         | <b>7</b> :               | ,               | Yes                | /Dain Exp:<br>/              |
| 9. Year: 80.          | Make:         |                                                                                                                | 81. Mo          | del:              | <del></del>                           | 82. Vehi              | cle Style         |         | 83.#                                    | of Doors:                     | 84.0                     | Calar,          | 85. St             | <b>1</b> 2:                  |
| 6. V.I.N:             |               | · · · · · · · · · · · · · · · · · · ·                                                                          | 87. Lic         | case Plate:       |                                       | 88. Siste:            | <b>89</b> .       | DOD     | Decal Nur                               | nber:                         |                          |                 |                    |                              |
| OTES:                 |               |                                                                                                                | <u> </u>        |                   |                                       |                       |                   |         |                                         |                               |                          |                 |                    |                              |
|                       |               |                                                                                                                |                 |                   |                                       |                       |                   |         |                                         |                               |                          |                 |                    |                              |
|                       |               |                                                                                                                |                 |                   |                                       |                       |                   |         |                                         |                               | •                        |                 |                    |                              |
| •                     |               |                                                                                                                |                 |                   |                                       |                       |                   |         |                                         |                               |                          |                 |                    |                              |
|                       |               |                                                                                                                |                 | FOI               | ROFF                                  | CIALUS                | E DAL             | Y       | · • · · · · · · · · · · · · · · · · · · |                               |                          |                 |                    |                              |
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| UTHORUTY:                                    | Title 16           | ), United States                | Code 860                  | DATA<br>tim 3012 (                            | R)<br>GEÓLIAC | 3D BY 78<br>R      | OUTINE     | ict<br>USES:  | Are un            | ial steni<br>ed as an e<br>iast asd | وتنالك        | ber sod :  | dier per         | ped information<br>of identification |
| RINCIPAL PURPOSE                             | : То ризу<br>споим | ride commande<br>by which infin | es and law<br>resation or | ry be eccur                                   | nt official   |                    | DISCLOS    | URE: E        | Sisclesur<br>37 - | e of your                           | social<br>- C | Commity is | is volu<br>- Q Q | 81702                                |
| Rec Code: 2. Activ                           | en Code:           | 3, Deter                        | 4. Rel<br>Subje           | to Caso:<br>ot                                | 5. Cont       | rol:               | 6. Seques  |               | 7. Year           | 1, O                                | Tice          | 9. R       | OX Ø             | Officero:                            |
| ( Part )                                     | -                  |                                 | Mine:                     |                                               |               | )<br>}             |            |               | <b>18</b> 5 77    | ingle stransport                    | peron e e     |            | 13.0             | 記江丁                                  |
| Andread St. March Co. C. Ster.               |                    | 5. Other ID No                  | mber:                     | y                                             | 44 margar     | il etc             |            | ). <b>121</b> | n Const           | THE REAL PROPERTY.                  | Ţ):           | W. Control |                  | 19. POB Zap:                         |
| 氏 11.65                                      | 22, Ethn           | ic: 23. High                    | it; 24.                   | 38                                            | Brn           |                    |            | J             |                   | 16                                  | _1            | Ly French  |                  | 3                                    |
| <i>A</i>                                     | escription/        | Location: 33                    |                           | 34. Scourit                                   |               | 35. Physic         | el Marke/  | Tellous       |                   |                                     | Ye:           | pouse M    |                  | Brush:                               |
| . Alina/Nicknames.                           |                    |                                 | 3E                        | Alias/Nic                                     | ORANIA:       | <u>   </u>         | it Phone N |               |                   | 9. Alisafi<br>Home:                 |               |            | Cell/Page        |                                      |
| Unit/Organization:<br>Z<br>Military Service: |                    | av<br>Sub Upk:                  | 1 22                      | Fort/City:                                    |               |                    | n Pouse r  |               | 16. Coun          |                                     | -             | 47. Zip (  |                  | 0.                                   |
| Home Address                                 | *3.3               | 49. City.                       |                           | , . wo chy.                                   |               | l_                 | 0. State:  |               | 1. Coun           |                                     |               | 72.20 C    |                  |                                      |
|                                              | <i>.</i>           |                                 |                           |                                               | 4             |                    |            | 7             |                   |                                     |               |            |                  |                                      |
| JUV: 54, Family                              | Ret:               | 5. Last Name:                   | *-                        |                                               | 56.           | Piret Nato         |            | · · · · ·     | 61. Volt:         |                                     | Middle        | Nume:      |                  |                                      |
| Social Security:                             |                    | 63. Stete:                      | 59. Grado                 | (Rank:                                        | ADO-          | 60. MC             | ··         |               | Phone:            | Wk:                                 |               |            | Han:             |                                      |
| . City:                                      |                    | 03. Steet.                      | -                         | , <b>, , , , , , , , , , , , , , , , , , </b> |               |                    |            | !             |                   |                                     |               |            |                  |                                      |
| . Olfrasci Code:                             | 67, UPC:           | 68, Officias                    | Code:                     | 69. UFC                                       | 70            | Offices (          | ode:       |               | 71. URC           | 72                                  | .06%          | se Code:   |                  | 73. UFC:                             |
| Carlo Maria                                  | B                  | inde                            | _                         | PCS/DEB                                       | DS:           | •                  |            |               | me late<br>te:    | view ST                             | LRT:          | T          | nte:             |                                      |
| ce of Interview.                             | - 1                | 1. 1.902                        | <u></u>                   | <del></del>                                   | <del>,</del>  | _                  |            |               | inte Inte         | view EN                             | D:            | 17         | me:              |                                      |
| sposition:                                   |                    |                                 |                           |                                               |               |                    |            |               |                   |                                     |               |            |                  | •                                    |
| . Category:                                  | 75.                | Туре:                           | 76. Ruso<br>Yes:          | overed:<br>No:                                | 77, Va        | lec:               | 78. ins    | grer.         |                   | Pali                                | oy:           | _          | -:-              | Year/Deta Bap:<br>/                  |
| . Year: 80.                                  | Make:              | <u> </u>                        | 81. Mad                   | iel:                                          | <u>.1 </u>    | 82. Yehi           | cle Style: | ·             | 83.# 6            | f Doors:                            | 8             | 1. Color:  | 8                | 5. Stze:                             |
| . V.I.N:                                     |                    |                                 | 87. Lice                  | ense Plate:                                   |               | 8. State:          | 89. I      | O doc         | cal Num           | ber:                                |               |            |                  |                                      |
| OTES:                                        |                    |                                 | 1                         |                                               |               |                    |            |               |                   |                                     |               |            |                  |                                      |
|                                              | . <b>.</b>         |                                 |                           |                                               |               |                    | <b>_</b>   |               |                   |                                     | —- <u>;</u> - | . <b></b>  | ·                |                                      |
| _ <b></b>                                    |                    |                                 |                           |                                               |               |                    |            |               |                   |                                     |               |            |                  |                                      |
|                                              |                    |                                 |                           | ድለስ                                           | ስምፕላ          | iai kel            | : UNIA     |               |                   |                                     |               |            |                  |                                      |
| COST VINCE STREET                            | Ą:                 |                                 |                           | Firm                                          | 1-5-51        | 1577 76 <b>7</b> ( | DIVLI      |               |                   |                                     |               |            |                  |                                      |

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| AUTHORITY:               | π                     | kie 10, l           | Jaked Su              | Mary Cod             | fe Sec                                       | DATA<br>tion 3012      | (8)<br>RED         | JERGEL             |              |         |        |          | Your sox<br>Are us | ini seco         | rity co<br>additi | mber at<br>ogsl/site | d other  | Dixto.    | esi informat<br>of identifica | tice<br>fice |
| PRINCIPAL P              | URPOSE: To            | provide<br>cases by | e contrat<br>which in | vdets un<br>forqueti | nd lanv<br>Ion ma                            | cuforous<br>ly be seen | iogi ofi<br>muziky | ficials<br>identif | with<br>Sed. | DISC    | LOS    |          | Discloru           | -                |                   |                      | -        |           | 7<br>1702                     |              |
| I. Reo Code:             | 2. Action Co          | de:                 | 3. Date:              |                      | i itali<br>Julija                            | o Case:                | 3.0                | cated              | È            | 6. Se   | dra    | to I     | 7. Yes             | t. <b>18.</b>    | Office            | 9.                   | ROI#     |           | Officase:                     | $\neg$       |
| The second of the second | The street of section | reagnity of the     |                       |                      |                                              |                        | el (are γ          |                    | <u> </u>     | ·       | 111,41 | <u> </u> | was a second       | e in line i      |                   | ٠                    | ř        |           |                               |              |
| 10. Last Name            |                       |                     |                       |                      |                                              | A CHARLES              |                    |                    | ,            |         |        |          | 7                  | 76.              | •                 |                      | -18      |           | 211                           | _ 1.7        |
| 14. 8-01-                | AND DIVE              | 15.                 | Other ID              | Numbe                |                                              | I.                     |                    | 2.14               |              |         | 1      | 7. PC    | N. S. C. OFFERS    | ه ۱۰۰ جب هر عنوا |                   | II. PO               | i Bit    | 1         | 9. POB Zip:                   |              |
|                          | TC 2                  | Ethnic:             | 23. Hz                |                      | 24.                                          | Weight:                | 3                  | //\<br>/*\         | <b>A.</b>    |         |        | · Zf.    | Cional.            | 24. E            | đục:              | 29. Pt               |          | ord:      | 30. Musiko                    | d:           |
| <b>7</b> . 1             | 32. Job Descrip       |                     | - I - WE              | 33. MC               |                                              | 34. Securi             |                    |                    | Phys         | cal M   | Mr. S. | Tatto    | Des:               | <u></u>          |                   | . Spores             |          | ry:       | Brench:                       |              |
| 37. Alias/Niok           | names:                |                     |                       |                      | 38.                                          | Alles/Nik              | ckqare             | #:<br>             |              |         |        |          | T                  | 39. Alfa         |                   |                      |          |           |                               |              |
| 40 Unité Orga            | nization:             | - /                 |                       |                      | <u>.                                    </u> |                        |                    | 7                  | 41. L        | Init Ph | one)   | lumb     | <u> </u>           | Hon              | 16:               |                      | Cell     | Pager     |                               | _            |
| 42. Military Se          | ervice:               | 43. Sub             | ≥ U<br>Veit:          |                      | 44.                                          | Port/City              | y:                 | l                  | Ţ            | 45. St  | ale:   |          | 46. Con            | ntry:            |                   | 47. 2                | ip Code  | APO       | : .                           |              |
| 48. Home Add             |                       |                     | 49. Cit               | 77                   | <u>.l</u>                                    |                        | 3                  |                    | +            | 50. 81  | ÚE,    |          | 51. Cou            | utry:            |                   | 52.Z                 | Col      | ARC       |                               | 67           |
|                          |                       | À                   |                       |                      |                                              |                        |                    |                    |              |         |        |          |                    |                  |                   | y.                   |          |           |                               |              |
| 53. JUV: 1               | 34. Family Rei:       | 55.                 | Lest Nan              |                      |                                              |                        |                    | 56. FL             | rat Na       |         |        |          |                    |                  | 7. MIG            | die Nam              | <u> </u> |           |                               | _            |
| 58. Social Sec           | erity:                |                     |                       | 1                    | Grade                                        | Rank:                  |                    |                    | 60. N        | IC:     |        |          | 61. Unit           |                  |                   |                      |          |           |                               | _            |
| 62. City:                |                       |                     | 63. Ste               | le:                  |                                              | 64, ZII                | P/APO              | :                  |              |         |        | 65.      | Phone:             | Wk:              |                   |                      | H        | ien:<br>  |                               |              |
| 66. Offense Co           | de: 67. U             | FC:                 | 61.00                 | se Cod               | ė:                                           | f 69, UF               | Ċ:                 | 70. C              | Albert 6     | Code    | ;      |          | 71. UP             | 3: T             | 12. OE            | hasa Co              | da:      |           | 73. TRC:                      |              |
|                          |                       |                     |                       |                      |                                              | 1                      |                    |                    |              |         |        |          |                    |                  |                   |                      |          |           |                               |              |
| Telephone:               |                       | ETS                 | مله                   | T                    | $\Box$                                       | PCS/DE                 | ROS:               |                    | -"           |         |        |          | Tamb leit<br>Date: |                  |                   |                      | Time:    |           |                               |              |
| Place of Interv          | lev:                  |                     | · · · · ·             |                      |                                              |                        |                    |                    |              |         | T      |          | Time Inte<br>Date: | rview E          | ND:               |                      | Time:    |           |                               |              |
| Disposition:             |                       | -                   |                       |                      |                                              |                        |                    |                    |              |         |        |          |                    |                  |                   |                      |          |           |                               |              |
| 74, Category:            |                       | 75. T               | ypœ                   |                      |                                              | overet<br>No:[]        | 77                 | . Valu             | E.           | 77      | l. fas | ध्रव.    |                    | . Po             | ilicy:            |                      |          | 7         | /esr/Date B                   | tp:          |
| 79, Yest:                | 80. Make              | :                   |                       | g g                  | I. Mos                                       | del:                   | <del>l</del>       |                    | 82. Ve       | bicle S | tyle:  |          | 83. #              | of Door          | 3:                | 84. Col              | or.      | 85.       | Stze:                         |              |
| 86. V.I.N:               |                       |                     |                       | - 8                  | 7. Lice                                      | mse Plate              |                    | <br>  €2.          | State        | П       | 89.1   | doo      | Decal Nor          | nber.            |                   |                      |          | .!        |                               | $\dashv$     |
|                          |                       |                     |                       |                      |                                              | <del></del> -          |                    |                    |              |         |        |          |                    |                  |                   | <u>.</u>             |          |           |                               |              |
| NOTES:                   |                       |                     |                       |                      |                                              |                        |                    |                    |              |         |        |          |                    |                  |                   | •                    |          |           |                               |              |
|                          |                       |                     |                       |                      |                                              | FOF                    | ₹ OFI              | icia               | l US         | E ON    | Ľ      |          |                    |                  |                   |                      |          |           |                               |              |
| i tal mil                | A LANGE CALL          | ¢:                  |                       |                      |                                              |                        |                    |                    |              |         |        |          |                    |                  |                   |                      |          |           |                               | . 9          |

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|                          |                    |           | n Hained Ch                     | -tee Code           | DATAR<br>Section 3012 (a             | SQUEE<br>1)  | D BY PRIV    | ALY A        | CT<br>ISBS:              | Your social           | эосигіду я                                         | pullaber and o  | ther parac | eni infanssion          |                  |
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| AUTHORITY:               |                    | Title !!  | O, United Sc                    | ilital Cont         | ; 30¢000 3012 (g                     | v            | 1101         |              |                          | Are used to           | u en eddii                                         | inad/eltere     | to casters | of identification       | ı                |
| PRINCIPAL PI             | URPOSE:            | To pro-   | vide consults<br>s by which i   | nden sad<br>Obsarbi | i jaw enforcemen<br>m ensy be social | mil voice    |              | sclosi<br>01 | 7 -                      |                       |                                                    | 8, 2.2.z.       |            |                         | -                |
| 1. Rec Code:             | 2 Action           | Code      | 3. Detr                         | 1 200               | Rel to Case:                         | 5. Conte     | ni: G        | Sequen       | <b>QB if</b><br>Missions | 7. You.               | 3. Offic                                           |                 |            | Office:                 | _                |
| TO 1                     |                    |           | . (1) <u>1, 4444, 1, 1, 144</u> |                     |                                      | 22.          |              |              | ·                        |                       |                                                    |                 | B-4/C      | PL DIVLP                | !<br>1 67८-;     |
| K                        | باديدوه دد         | . z-(     | 15. Other II                    | Number              | Anna henry 195 257 3                 | of E         | irth:        | 1            | , PCB                    |                       | 28.元泽                                              | N. A. P. C. St. |            | 9. POB Zip:             | 66               |
| Harris Harris            |                    | Ethi      |                                 | olgist:             | 24, Weight:                          |              | BL           | Colo         |                          | and the second second | moteric trees                                      | 4-78-11-18      | spoord:    | 10. Marital:<br>SHUINLE | •                |
| 31. MOS: 3               | 117E<br>2. Job Des | cription  | Location:                       | 33. MC              |                                      | Cir. 3       | 5. Physical  | Marks/       | Talibos                  | <del> </del>          |                                                    | 6. Spouse M     |            | Branch:                 | -                |
| 13 A                     | names:             |           |                                 |                     | 18. Alina Niol                       | names:       |              |              |                          | 39,                   | Alies/Nic                                          |                 |            |                         | -                |
| 40. Unit/Orga            | rimtion:           |           | <u></u>                         |                     | <u> </u>                             |              | 41. Unit     | Phone N      | lumber                   | <del></del>           | House:                                             |                 | al/Page    | :                       | -                |
| HSIS /<br>42 Military Sc | 1-8Z               | <u>E4</u> | 12<br>São Unit:                 | <b>2.</b> T         | 1 CD<br>44. Fort/City:               |              | 45.          | State        |                          | 46. Country           | <u> </u>                                           | 47.250          | ode/APC    | ): ·                    | •                |
| 4% House Add             |                    |           |                                 | tare                | <u></u>                              | <del>.</del> | 50,          | State        | ╌┼                       | 51. Country           | <del>.                                      </del> | 52.50           | 11/1       | 674                     | -31<br>56-3      |
| 34 (Mars 24)             |                    |           |                                 |                     |                                      | ·            |              | ě.           |                          | <u> </u>              |                                                    |                 |            | 4                       | <i>56-つ</i><br>[ |
| 53. TUV: 5               | 4. Parally         | tel:      | 95, Last Ne                     | me:                 |                                      | 56. 1        | Piest Nation |              | -                        |                       | 37. M                                              | ESE PEGAL       |            |                         | _                |
| 58. Social Sec           | ority:             | <u>.</u>  |                                 | 59. 0               | rede/Rank:                           |              | 60, MC:      | ,            |                          | 61. Unit:             |                                                    |                 |            |                         | _                |
| 62. City:                | <u>-</u>           |           | 63. St                          | ite:                | 64. ZIP/                             | APO:         | <u></u>      |              | 65.                      | Phone:                | Wk:                                                |                 | Hm:        |                         |                  |
|                          |                    |           |                                 |                     | 69. URC                              | 70           | Offices C    | de           | ,                        | 71. UFC:              | 72.0                                               | Bense Code      |            | 73. UPC:                |                  |
| 66. Offense Co           | ida: 6             | . UFC:    | 69, 045                         | nio Code            | \$9. UPC                             | 70.          | 00000        |              |                          |                       |                                                    | ·               |            | <u> </u>                | ı                |
| Telephone                |                    |           | T9:                             |                     | PCS/DBR                              | OŚ:          | •            | 1            |                          | Cime Intervi<br>ate:  | ow STAK                                            | î:<br>Ti        | iste:      |                         | •                |
| Place of Interv          | lew:               |           | UDE                             | Ē                   |                                      |              |              |              | Date / 1                 | rime latervi          | ew END:                                            |                 | ine:       |                         | _                |
| Disposition:             |                    |           |                                 | -                   |                                      |              | <del></del>  |              |                          | <del></del> -         | <u>.</u>                                           |                 |            | <del></del>             | -                |
| ·                        |                    |           |                                 |                     |                                      |              |              |              |                          |                       | Policy:                                            |                 |            | Year/Data Exp:          |                  |
| 74. Category:            |                    | 7:        | . Турк:                         | 76<br>Ye            | Recovered:                           | 77. Va       | hie:         | 78. Ins      | urer:                    |                       |                                                    |                 |            |                         | _                |
| 79. Year:                | 80. 1/             | igke:     |                                 | 81                  | . Model:                             |              | 82. Vehic    | le Style:    |                          | 83, # of 1            | Doors:                                             | 84. Color:      | 8.5        | , Size:                 | 1                |
| 86. V.I.N:               |                    | . —       |                                 | 87                  | . License Plate:                     | 8            | . State:     | 89.1         | <u> </u>                 | ecal Numbe            | r:                                                 | <u> </u>        |            | _ <del></del>           | 1                |
|                          |                    |           |                                 |                     |                                      |              | <u></u>      |              | · Lea                    |                       | 670                                                | 1,06            | -5         |                         | -                |
| NOTES:                   | us ho              | + 7       | reseut                          | bvi e               | ofer by 3                            | /=C          |              | e a          |                          | 104                   |                                                    |                 |            |                         |                  |
|                          |                    |           |                                 |                     | <u> </u>                             |              |              |              |                          |                       |                                                    | •               |            |                         | T                |
| 1                        |                    |           |                                 |                     |                                      |              |              |              |                          |                       |                                                    |                 |            |                         |                  |
|                          |                    |           |                                 |                     |                                      |              |              |              |                          |                       |                                                    |                 |            |                         |                  |
| , ,                      | ) minima           | . 6       |                                 |                     |                                      |              |              |              |                          |                       |                                                    |                 |            |                         | _]               |
| CTD FORM                 |                    | lae ver   | ion                             | FF                  | TTX, 1999                            |              | 4            |              |                          |                       |                                                    |                 |            |                         |                  |

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| e of Scotnov lagranger                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | with mentiodes and I<br>move by which inform | ier esistemat ellipsi<br>dan sport be sammely i | O<br>POLIZIO Deltado                    |                                       | or or keesi eesey ==<br>f = CID.9 j                                                            |                                              |                |        |
| 1 REC CODE 2 ACTION CODE 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | OATE STOLETTED                               | 4 SEE PRINCER S                                 | TEXT I UNIT                             | 7 ACI MINISTER                        | \$-16E_                                                                                        | to CUSE 9 CO                                 | GPGL #         |        |
| A4 1 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 01                                           | 41                                              | E) -3<br>Dual data                      | <u> </u>                              | <del></del>                                                                                    | 1                                            | 3              | 1      |
| MILES CONTRACTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <del></del>                                  | 17.70                                           |                                         | 12 Mary Ash                           | Mar.                                                                                           | 13 69/0                                      |                | 171-3  |
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| The state of the state of the state of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                              | WEEK! S WAR COUN                                | 1                                       | S. Sides                              | AGE: 12                                                                                        |                                              |                |        |
| F 1 CHICI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                              | ADUSTRY 25 SECURI                               | <del></del>                             | V.S. 2                                | B.A. 21                                                                                        | 11                                           | S:45   < 1     |        |
| 31 MBS 32 MC=C<br>97 EAQ 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Indermator :                                 | 2 Secre                                         | . 1                                     | ,                                     |                                                                                                |                                              | _ 45           | }      |
| 37 ALAS-ROYUMES)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <del></del>                                  | SI ALDS-HICHAME                                 |                                         | )                                     | AS-HICHANE                                                                                     |                                              |                |        |
| 40 OPENNEATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                              | 0                                               |                                         | 23 41 EF                              | CONTRACTOR CONTRA                                                                              | Cf /                                         |                |        |
| A CO 312 N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | II BN                                        |                                                 |                                         |                                       |                                                                                                |                                              | 11             |        |
| 42 MELITARY SVC 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | SUBURIT                                      | z Fort Hood                                     | # · · · · · · · · · · · · · · · · · · · | 45 57                                 | ATE 46 COUNTRY                                                                                 | 17 219 CODE 1<br>2 7654                      |                |        |
| 48 ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <u> </u>                                     | I as cory                                       | <del></del>                             | 18 / /                                |                                                                                                |                                              |                |        |
| A CO SP ME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | BN, /KCT                                     | Baghdad                                         |                                         | 16                                    | , IZ                                                                                           | <u> ,                                   </u> | 9              |        |
| STURDY   SI FAMILY RE.   55                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | SCHSCH LAST MANE                             |                                                 | STAR FEST HAVE                          |                                       | I ST SZTARSCR                                                                                  | MIXICE NAME                                  |                |        |
| ST ARV   SI FAMILY RE   55                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Sringup treat fromt                          | 21                                              |                                         |                                       | 13                                                                                             |                                              | 15             |        |
| SA SOCIAL SECURITY HUMBER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | SE SECH GRACE   6                            | SPON MICHO BY SPON                              | ISCR UMIT ACCRESS                       |                                       |                                                                                                |                                              | Z.             |        |
| BE SHOW CHY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 7:<br>  65                                   | इन्ट्रेस डा <u>६४ इन्ट्र</u> ेस टा/             | # SPON ZP CZOE/A                        | <u> </u>                              |                                                                                                |                                              |                |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 18                                           | 2 2                                             | <u> </u>                                | <u>. jį .</u>                         |                                                                                                |                                              |                |        |
| 9 OFFERS COS 6                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 7 UFC   88 CFTENSE CCC                       |                                                 | FENSE<br>RIOTENSE COS                   | [ 71 VF                               | :   77. OFFEISE 000                                                                            | <br>E                                        | ನಳನ            | Ì      |
| 5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 1                                            | 5 1                                             |                                         | 1 ·                                   | <u> </u>                                                                                       |                                              | ,              |        |
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| 53/ -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | F3                                           | FCS/OERCS                                       | डाआ<br>इस्स                             | Ţ                                     | 7.ART                                                                                          |                                              |                | D!C 7  |
| PLACE OF INTERVIEW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DATE INTERV                                  | TIME SHITERY                                    | RACE OF BITEME                          |                                       | FINGERPRINT                                                                                    | PROT                                         |                | }      |
| START<br>VBOCE DATA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 640                                          | <u>en</u>                                       | END<br>CISPOSITION                      |                                       |                                                                                                |                                              |                |        |
| ABOOTE Dryy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                              | :                                               | (SSP(S)) ICA                            |                                       |                                                                                                | •                                            |                |        |
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| 74 CONTRACTOR MIMSES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 75 FED SERV/PROD (                           | 76 CORPORATION N                                | AME                                     |                                       |                                                                                                |                                              | <b>1</b> 5     | ]      |
| TT CORP ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 12                                           | 4 TR CORP CITY                                  | · · · · · · · · · · · · · · · · · · ·   | देश हत                                | RF 57 80 CORP (                                                                                | TY   St CORP ZE                              |                | 1      |
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| EZ CONTRACT HUMBER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                              |                                                 | _ <del></del>                           |                                       |                                                                                                |                                              | •              | 1      |
| NOTES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 15                                           | ·····                                           | <del></del> -                           |                                       |                                                                                                |                                              |                | 1      |
| MIG.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                              |                                                 |                                         |                                       |                                                                                                |                                              |                |        |
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| AUTHORITY:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | The local      | J <del>ainel Samo</del> C | acis, Seasie | <b>1917</b> 16).    |                    | ROUTE                          | R USES: 7   | اماده میداد<br>ماده مطو | manity see    | بو جداد<br>ایاده خد | مدر جبات ا<br>دخاطاندبا    | nosi.<br>Proposi | -÷         |          |
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| PRINCIPAL PURPOSE.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | To provide     | demonstra                 |              | dependent off       | icinie             |                                |             | _                       | Ol yang dadai |                     |                            |                  |            |          |
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| 1 REC CODE   2 ACTION CO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | DE 1 DATE      | SUBJECTED                 | 4 55         | RIMAR               | 5 <b>YEAR</b>      | क व्यक्त                       | _ C MOJ W   | AND PARTY.              | _ *           | PES, . ILP I        | 205 A 00                   | MING. ()         |            |          |
| A4 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1              |                           | <u>s </u>    |                     | NYDUAL.            | MAYES.                         | <u>81</u>   |                         |               |                     |                            |                  | _1         |          |
| 10 LAST INGER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                |                           |              | 1 PART ANALE        | Uktivier-          | QA (A                          | 12 140      | II WAR                  | : '0100' 10   |                     | 11 GRAC                    | <u> </u>         |            |          |
| NUSA MASS.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 44 *** 1 ****  | 1                         | <u>"</u> '   |                     |                    | 19                             |             |                         |               | 1                   | s   <i>0-</i> 5            | 2/AD             | 2 /        | Jr.      |
| 14 STEIN, 580                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | WETT           | S OTHER ED A              |              |                     |                    | The second second second       | . Barre     | A Company               | Table 1       | m.                  | 12 12 41                   | 19 POS           | GTY "      | <i>n</i> |
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| SPREET TENNET TO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | STARRE         | D NEEK CL                 | N WEEK       | T ZE HAM            | <b>CLD B</b>       |                                | 27 1112     |                         |               |                     | R RECORD                   | SO MARITAL       | •          |          |
| MICI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <del>-</del> 1 | 721" 2                    | 200          | 3 BRI               |                    | RN                             | e US        | 2/                      | 18 2          | N                   | 7. 1                       | 771 .            | <u>. 1</u> |          |
| J1 MOS 32 MC2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | द क्र          | POSTION                   | N MOUSE      |                     | PE S               | 36 PHYSICAL M                  | MRC5        |                         |               |                     |                            |                  | Ŀ          |          |
| GS DSP 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 3 500          | Marion Sunga              | S            | THEODINEALIA S      |                    |                                | •           | 39 AUA                  | HOCICIANE     |                     |                            |                  | <u>_a_</u> |          |
| n who will the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the sta |                |                           |              | -                   |                    |                                | 粒           | ]                       |               |                     |                            |                  | 20         |          |
| 40 CHRYMIZATON HAL S OF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | VIEL BAN       | Ary)                      |              | <u> </u>            |                    |                                |             | 41 F 00                 | MIRACIUR, CO  | HTRACT              | ,                          |                  |            |          |
| HSB . 1-8                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | a FA           | 15 BX                     | 11           | $CD_{-}$            |                    |                                | <u> </u>    | <u> </u>                |               |                     |                            |                  | 13         |          |
| 42 MEL/TARY SVC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 43.905         |                           | - 1 +        | FORT/CZY            | _                  |                                |             | 4 STATE                 |               |                     | 47 ZP CODE/<br>4 Fr - 2002 |                  | اد         |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u> </u>       | <del></del>               |              | Camp 1              | , uervo            | <del></del> -                  | 11          | SO STATE                | t Bealta      |                     | <u> </u>                   |                  |            |          |
| 46 ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 1,18           | 40~                       | 1            | FOR                 |                    |                                | 19          | <del>" </del> "         | , ,           | ''''',              | 7654                       |                  |            |          |
| HSB, HOLFA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4)             | pyc                       | 됩            | FAMIL               | Y MEMB             | ER DATA                        |             |                         | <del></del>   | <u>.</u>            |                            |                  |            |          |
| SI JAN SI FAMILY RE.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <u> </u>       | OR LUST NAME              |              | 1,,,,,,             | 50 SP(HSC)         | FRST XAME                      |             |                         | श्च इंग्ल     | SCR MIC             | OLE NAME                   |                  | $\neg$     |          |
| 1 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 1              |                           |              |                     |                    |                                |             |                         | 15            |                     |                            |                  | 12         |          |
| SI SOCAL SCURITY NUMBER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 3 5            | SCH CSADE                 | ED 523H      | MCVC 81             | SPONEGR US         | ACOPESS                        |             |                         |               |                     |                            |                  | _          |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u> </u>       |                           | ET SPCH S    | 2  <br>17   64 SPCH | CT ( ) ( ) ( ) ( ) | PCH 20° COE/                   | <u> </u>    |                         |               |                     | -                          |                  | 픠          |          |
| 62 S70H CTTY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                | [                         | DI SECU A    | 2                   | ,                  | . u                            |             |                         |               |                     |                            |                  | - {        |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                | 18                        |              | <u> </u>            | OFFEKS             | <u> </u>                       |             |                         |               |                     |                            |                  |            |          |
| SE OFFERE CODE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | . 67 UFC       | 68 OFFEISE                | ææ.          | 69 UFC              |                    | ENSE CODE                      |             | 71 UFC                  | 72 OFFENSE    | CCCE                |                            | 316              |            |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 5              | 4                         |              | 5                   | 1                  |                                |             | 1                       | •             |                     |                            | <u>t</u>         | _1         |          |
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| TE ENCHE I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                | :3                        |              | FG/CECS             |                    | 2715 H                         | ;           | 1                       | _             | , ]                 |                            |                  | 4          | 66       |
| · 531-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                | 7 a                       |              | TIME INTERV         | 1 9.1              | <u>्र इस्त</u><br>पद ए अस्तिगा |             | 1 STAR                  | FINGER!       | 2HT                 | Pess                       | <del></del>      |            | -        |
| PULCE OF INTERVIEW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                | DATE INTER                | •            | 640<br>ITME TATESA  | 88                 |                                | ٥.          |                         | 1             |                     |                            | _                | - 1        |          |
| VBIOLE DATA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                | END                       |              | [ enu               |                    | FCSTICH                        | ······      |                         |               |                     |                            |                  |            |          |
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| 74 CONTRACTOR HUMBER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                | 75 FD SERV/PR             | CO #         | 75 CORPORATI        | Ch name            |                                |             |                         |               |                     |                            |                  | _1         |          |
| To come i comercia                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 12             |                           | 41           | CORP CTTY           | <u>:</u>           |                                | <del></del> | 79 0000                 | इंग्री हा देख | क दर्भ              | 81 CORP 20                 | CODE             | 픠          |          |
| 77 CORP ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                           | +            | CONT. CIT           |                    |                                | 15          |                         | 2             | 7                   |                            |                  | - 1        |          |
| 82 CONTRACT NUMBER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                | <del></del>               | <u> </u>     |                     |                    |                                |             |                         |               |                     | <u> </u>                   |                  | $\neg$     |          |
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| अग्रह                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                | <u>-</u>                  |              |                     |                    |                                |             |                         |               |                     |                            |                  | - 1        |          |
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                                                                                                                                                                                                                                                                                               | 7 <sup>D2</sup> * <b>17</b> *1 | e of Conta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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Date:         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | References<br>Mark               | 5. 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Secur     | blac                       |                     | h. 100     | <i>.</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | OR:                            | 28. 5dac:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 29: Philir Ki<br>36: Sponso Mili               |                 | 30. Marital:                       |
| 37. Alias/Nicknerses  |                             |                    |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 38. 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| 40 Valet Organization |                             | מגי                | <del></del>      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          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| 42. Military Service: | 7 82-1                      | 3. 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Conn                       | <b>hy:</b><br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 22. 25 CD                                      | Se/APO:         | 570                                |
| 53: RIV: 34:34:34     | lly Mat:                    | 55.1               | and Pear         | ME.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                  | 56                         | Plan bla            | 7.00       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | - Britaini (1977)              | 37:14                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | State Name                                     |                 |                                    |
| 58. Social Security:  |                             |                    | 73 B-            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | rede/Rank:                       |                            | 60. 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| 62. City:             |                             | .;                 | 63. Stat         | ( <b>a</b> ;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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| 66. Offense Code:     | 67. UF                      | Ċ:``               | 8. Offer         | sse Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 69. UP                           | C: 79                      | 0. Officia          | Code:      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 71.UFC                         | 72.0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Gassa Cada:                                    |                 | 73: UFC:                           |
| Telephone:            |                             | ers:<br>Iu         | 05               | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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| 74. Calegory:         |                             | 75. 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Year: 8           | ), Muke:                    | _                  | -                | BI.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Model:                           |                            | 82. 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S          | (P.A.)                             |
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V.I.N:            |                             |                    |                  | 87.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | License Plate:                   | ) 8                        | 88, State:          | 39         | . DÕD Î                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Jecai Nigani                   | XCC:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                |                 |                                    |
| NOTES:                |                             | -                  | -                | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | . <del></del>                    |                            |                     |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                | - 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| 74 CONTRACTOR NUMBER                   | i i                                                                                                            | FD SERV/PRO                     | 0 /           | 76 CORPORAT                  | TON HAME                   |                |                    |                                               |                                   |           |             |                                              |               |
| 77 CORF ADDRESS                        | 12                                                                                                             |                                 | 4 k<br>  78 d | CORP CITY                    | •                          |                | 'n                 | 79 CCRP 57                                    | <del>- 21</del>                   | RP CTY    | 81 CDRF 25  | C20E                                         | 4             |
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| PRINCIPAL P                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | URPOSE:                                          | To provid                                   | de commune<br>sy which ha | dess and i<br>Correction | ursà pe scent<br>Em cirjatente | at officials<br>wely ideat | with I<br>ified.  | DISCLOS<br>O      | URE:         | Disclosure<br>7 - 0 | of your soc<br>4 - C I                         | D B B R                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 81702                                             |                 |
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| Transfer.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                  |                                             | Other iD                  |                          | īd                             |                            |                   |                   | 7.74         | 20 10 3.30          | ar.                                            | LA DED SE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                   | p: 17           |
| +                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Mer                                              | car comic                                   | 23. He                    | はは:   2<br>.   <i>0</i>  | 4. Weight                      | ßK                         | 7                 | SIGN              |              | C                   | erroge:                                        | Tay Lien un                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Sord: 30. Mark                                    | tal:            |
| 13 B                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 12. Job Des                                      | cription/La                                 |                           | 33. MC:                  | 34. Securit                    | y Cir: 3                   |                   | al Marks          | Tatico       | id:                 |                                                | 6. Spouse Milk<br>/es: No:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ary: Amech:                                       | <del></del>     |
| 37. Alias/Nickt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | lanes:                                           |                                             |                           |                          | 38. Alies/Niol                 | प्राथम ह्यः                |                   |                   |              | 3                   | 9. Aliss/Nic                                   | knamer:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                   |                 |
| 40. Unit/ Organ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | nization:                                        | 1/0                                         | 2 FA                      | T/                       | n                              |                            | 41. Un            | di Phone i        | Numbe        | e; ·                | Home:                                          | Cell                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | /Pager.                                           | _               |
| 42. Milliary Sc                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | rvice;                                           | 43. Su                                      | b Unit:                   |                          | 44. Fort/City:                 |                            |                   | S. State:         |              | 46. Coun            | _                                              | 47. Zip Cod                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                   | —<br>—/         |
| 49. Home Add                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | A STATE OF THE STATE OF                          |                                             | 49. City                  |                          |                                |                            | 5                 | 0. 944            |              | 51. Coun            | <b>iny:</b>                                    | 52. Zie Cod                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | APO                                               | 670             |
| 33. JUV: 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4. Partilly P                                    | lek:   35                                   | Lest Nam                  | e:                       |                                | 56. F                      | irst Nato         | d:                |              |                     | 57. MG                                         | ide Nime:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                   | <b></b>         |
| 58. Social Secu                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | rity.                                            | <b></b>                                     |                           | 59. Ora                  | de/Rank:                       | ·····                      | 60. MC            | ::<br>            |              | 61. Unit:           |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                   | _               |
| 62. City:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                  |                                             | 63. State                 | ×                        | 64. <b>21P</b> /               | APO:                       |                   |                   | 65.          | Phone:              | Wk;                                            | ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Han:                                              | -               |
| 66. Offense Co                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | de: 67                                           | . UFC:                                      | 68. Office                | io Code:                 | 69. UFC                        | 70.                        | Officiale (       | Code:             |              | 71. UFC:            | 72,0                                           | Maria Code:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 73. UFC                                           | <u> </u>        |
| Telephone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                  | BI                                          | s:<br>No∍. I              | u ns                     | PCS/DER                        | OS:                        | •                 | ľ                 |              | Time later          | view STAR                                      | r:<br>Tippe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ,                                                 | .3              |
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| Disposition:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                  |                                             |                           |                          |                                |                            |                   |                   |              |                     |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                   |                 |
| 74. Category:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                  | 75. 7                                       | урс                       |                          | lecovered:<br>□ No:□           | 77. Vali                   | ite:              | 78. Ens           | tier:        |                     | Policy:                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Year/Date E                                       | Step:           |
| 79. Year:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 80. M                                            | ske:                                        |                           | \$1. N                   | (ods):                         |                            | \$2. Vohi         | cle Style:        |              | 83.# of             | Doors:                                         | 84, Color:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 85. Size:                                         |                 |
| 86. V.I.N:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <del>-                                    </del> |                                             |                           | 87. L                    | icense Plate:                  | 88                         | . State:          | 19. U             | DOD D        | ocal Numb           | NET:                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                   |                 |
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| CID FORM 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4-ROnli                                          | nt version                                  | 1                         | FHT                      | K, 1999                        |                            |                   |                   |              |                     |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                   |                 |

| DATA REQUIRED ST THE PRIVACY ACT AUTHORITY: This II, United Store Code Section MURG. ROUTING USES. There exist secretly gentles and other particular statements. Section 10.000.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
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| AUTHORITY: This 10. United Street Code, Section 302Rg). ROUTING USES: House code stated particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular particular  |
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| SE SOCIAL SECURITY NUMBER   59 SPCN GRACE   60 SPCN MC-IC   81 SPCN-SCR UNIT ACCRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
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| 74 CONTRACTOR MUMBER 75 PED SERVIPESCO / 76 CORPORATION NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
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| // UNP ALIXESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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| Soldies pequested an attorney at 1700 hrs. and did not went to talk further.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
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| AUTHORITY:                                                 | Tida 10, Ve                           | and Seems Code, Se                                                                                                         |                          | 25 SET 75 CES<br>26          | स्त्रक्ट स्थाप              | Your axial a<br>hikamotica            |                                                | el ette yezet<br>Ministration                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | === d           |
| PRINCIPAL PURPOSE:                                         | To provide a                          |                                                                                                                            |                          | icials<br>may identified. Di | 901.050778                  | District of                           | C1083                                          | 2, <u>21,1</u> 05                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |
| 1 REC DODE 2 ASTER CO                                      | 1 000 5                               | 4 (Fig. 4                                                                                                                  | 50: HABB.                | 5 YES   6 (                  | AST 7 HCI<br>-3             | MARIE .                               | \$ 165. TO                                     | CASE 9 COMPOL I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | g<br>3          |
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| NI LAST HAVE                                               |                                       | 2đ _                                                                                                                       | IT FIRST MAKE            |                              | 15                          |                                       |                                                | . St/e                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 12676           |
| 11 50000 20000                                             | 1                                     |                                                                                                                            |                          | 8                            | a car is him on the         | TO THE PROPERTY                       |                                                | - 12 MAR. 1. 13 (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | FOS-CITY 6      |
| M 1 17 At                                                  | Enter 2                               | 7/ 2 18                                                                                                                    | SENT 25 NAME<br>O 3 BILL | BOU                          | s U                         |                                       | 3 2 N                                          | 0 . 1 5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | TAL .           |
| 31 MGS 32 MC                                               | 22/9                                  | STITCH 34 1/80                                                                                                             | USTRY 35 S               |                              | SCAL MARKS                  |                                       | <del>/-/</del>                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <del></del>     |
| 21 YOUR WOOMES                                             | 11.75                                 | <u> </u>                                                                                                                   | 38 AUAS ATTAIN           |                              |                             | 39 ALIAS A                            | SCHAME                                         | <del></del> -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 |
| 40 CHEWIZATON 1/5                                          | B ECC                                 |                                                                                                                            | 111                      | - E :                        |                             | 41 IF CONT                            | NACTOR COMMUNIC                                | 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <u>26</u>       |
| 42 MILITARY SAC                                            | FSC SUBUR                             | iti (                                                                                                                      | amf Wa<br>H FURITUTY     | r Cagle                      | 5                           | 4 STATE                               | 46 COLINTRY                                    | 47 BP CODE/AP3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |
| 41_00935                                                   | 4                                     | z                                                                                                                          | e ary                    | agh dad                      | 12                          | to train                              | Lay 1                                          | AE 0937                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 5 1 67 6        |
|                                                            |                                       | <u></u>                                                                                                                    | FAMIL                    | Y NEMBER OF                  | ITA 18                      |                                       |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 676             |
| SI JUV SA FAMILY RE.                                       | S STANSON                             | LAST HAME                                                                                                                  | 20                       | SO SPONSON FIRST             | MANE                        | 15                                    | 1 ST SPEASER M                                 | COLE HAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 75              |
| SE SOCIAL SECURITY HUNGE                                   | } .                                   | SPCN GRADE 60 S                                                                                                            |                          | SPENSOR UNIT ADD             | <u> </u>                    |                                       | <del>.`</del>                                  | <del></del>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                 |
| 62 SPON CITY                                               | <u>\$1</u>                            |                                                                                                                            |                          | GTT   65 SPCH ZP             |                             |                                       | <del></del>                                    | <u>,</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | =               |
| <u> </u>                                                   |                                       | 18                                                                                                                         | 21                       | OFFERSE                      |                             | H                                     |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <del></del>     |
| æ 0 <del>==3</del> 8≅ 000€                                 | 67 UFC                                | 65 OFFERS XXX                                                                                                              | es ur.                   | <del></del> _                |                             | 71 UFC   3                            | 7 OFFERSE CODE                                 | 1 73 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                 |
|                                                            | <u> </u>                              |                                                                                                                            | ADMIN                    | HISTRATIVE DA                | TA                          | <u>' - 1!</u>                         |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |
| TESTAME I BOT LAND                                         | /                                     | 6 Jan 2006                                                                                                                 | PCS/0E-CS                |                              | CATE HITERY<br>START DA MAY | 04 START                              | 1750                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |
| PLACE OF INTERNIEN COMP<br>START BAGALAY, I<br>VERCLE CATA | Engle.                                | END DO PARY D                                                                                                              | THE SITERY               |                              | HEMEN                       |                                       | FNGEPRIKT                                      | দল্ভার                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                 |
| AGSOTS CALLY                                               | T.                                    |                                                                                                                            | <u>/ ( LNC</u>           | DESCRITA                     | N                           |                                       | <u>.                                    </u>   | <del></del>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                 |
|                                                            |                                       | <del></del>                                                                                                                | CORF                     | ORATION DAT                  | A                           |                                       |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |
| THE CONTINUES OF NUMBER                                    | 73                                    | FEI SENVINCO (                                                                                                             | 76 CORPORATA             | CH XXXE                      | <u>  </u>                   |                                       |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |
| IT CORP ADDRESS                                            | 12 }                                  | <del></del>                                                                                                                | 75 CORP CITY             | · <u>·</u>                   |                             | 73 CCR9 57                            | 80 009P CTY                                    | 81 CORP ZF COCE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <del>==</del> - |
| BZ CZNTRÁCT, NUMBER                                        | · · · · · · · · · · · · · · · · · · · | - 3                                                                                                                        | <del></del>              |                              | 18_                         | <u> </u>                              | <u>. 1</u>                                     | ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |
|                                                            |                                       | 15                                                                                                                         |                          |                              |                             | · · · · · · · · · · · · · · · · · · · |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |
| TC of                                                      | truck                                 | <b>f</b> .                                                                                                                 |                          |                              |                             |                                       |                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |
|                                                            | ,                                     |                                                                                                                            | FUN APPRO                | AT HISE ONLY                 |                             |                                       | _                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |
| CID FORM 33-R                                              |                                       | ر ب. وي. او رود ا <del>ر المحكمة</del> و مدين وي و و وي و و در و و در و و در و و در و و در و و در و و در و و در و و در و و | TO A LUC OT A            |                              |                             | ,                                     | المحالية 100 كان 100 كان المراس إماليو بعد عرب | المحالية الأحالية المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة الم |                 |

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| AUTHORITY                         | :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Title 10, L             | Inited Stat                             | es Code Se        | DATA<br>ection 3012 | 169QOU<br>(8)           | A AG COR            | NYAEY<br>ROUTINI  | ACT<br>E USES: | Are peed              | l security :<br>as an addi | inflikter auch oute<br>Foundfalternate (<br>rieval. | r personal in<br>mens of idea | Congression<br>htiSention |
| PRINCIPAL P                       | URPOSE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | To provide<br>access by | command<br>which inf                    | les and tar       | w culorcens         | est offici<br>atoly ide | als with<br>milled. | DEG 1             | SUPUP          | Discharica            | CTD                        | 8 002 A                                             | 762                           |                           |
| 1: Rec Code:                      | 2. Action (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Code:                   | 3. Date:                                |                   | te Case:            | S. Cus                  |                     | 6. Sequ           | moo f          | •                     | 1. GE                      | e 9. ROE                                            | CHA                           | <b>60</b> °;              |
|                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | h Carried .             | direction from                          |                   |                     |                         |                     | ولا به يو کورنۍ   |                |                       |                            | had an ada na indicata da lara                      | سالنجر أفاضياك أرور منيس      | e in the second           |
| 10/10/1                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                         | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Mäs.              | 33.03.0             | •                       |                     |                   |                | 648                   | 1                          |                                                     | 4/472                         | 186 /                     |
| E                                 | i enter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 15.0                    | Other ID N                              |                   | Marie Por           | Desco                   | (Blath:             |                   | 17.36          | N 1 1 70 08           |                            | A 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15      | 36 G. S. S.                   |                           |
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| 31. MOS:                          | 32. Job Deser                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | iption/Loc              |                                         | 3. MC:            | 34. Securi          |                         | 35. Physik          |                   | √ Tettoc       | )S:                   |                            | 6. Spouse Milit                                     |                               |                           |
| 1 1 <b>9.2</b><br>37. Alies/Nicto | क्ष्माई:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                         |                                         | - <u> </u>        | . Alies/Nio         | kormes:                 |                     |                   |                | 39.                   | Alles/Nio                  | 'es:[] No:[]<br>lesennes:                           |                               |                           |
| 40, Unit/ Orga                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | · -                     | <u> </u>                                |                   | <u> </u>            |                         | ] 41. Us            | alt Phone         | Numbe          | <u> </u>              | Home:                      | Cáth                                                | Pager:                        |                           |
| 上記で<br>42 Milliony Se             | 15 C DV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 43. Sub                 | FT. H                                   | <u> </u>          | Fact/City:          |                         | 1                   | 5. State:         | ·              | 46. Countr            | e:                         | 47. Zip Code                                        | ZAPO:                         |                           |
| •                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                         |                                         |                   | •                   |                         |                     | A Shife           |                | \$1-Car               | ·                          | 52. Zin Ove                                         |                               | ·<br><u> </u>             |
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| 33.70V: 13                        | A. Painty Ro                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | F 53:1                  | est Visco                               |                   | - 1 1/2             | 56.                     | Flori Num           | <b>T.</b>         |                | ing den               | 57. MI                     | die Name:                                           |                               |                           |
| 58. Social Secu                   | nity:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                         |                                         | 59. Crade         | /Rank:              |                         | 60. M£C             | <del>.</del>      |                | 6), Unit:             | <u> </u>                   |                                                     |                               |                           |
| 62. City:                         | <u>·</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <del></del>             | 63. State:                              |                   | 64. ZIP/            | APO:                    |                     |                   | 65.            | Phone:                | Wk:                        |                                                     | in:                           |                           |
|                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                         |                                         |                   | <u> </u>            |                         |                     |                   | •              | ,                     |                            |                                                     |                               |                           |
| 66. Offense Co                    | de: 67. U                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | JFC: 6                  | 8. Officia                              | Code              | 69. UFC             | ; 70                    | ). Offices (        | Code:             |                | 71. URC:              | 72.00                      | fease Code:                                         | 73. (                         | JFC:                      |
|                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 12-00 00000             |                                         |                   | PCS/DER             | nat.                    |                     | <b></b> ,         | MaisY          | Cime Intervi          | OT LOT                     |                                                     |                               |                           |
| Telephone:                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 56s                     | <u>ماه ۲۰</u>                           |                   | residen             |                         |                     |                   | D              | ate:<br>l'ima latarvi |                            | Time:                                               | <u></u>                       |                           |
| Place of Intervi                  | 6¥:<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                         |                                         |                   |                     |                         |                     |                   |                | ate:                  |                            | Tirae                                               |                               |                           |
| Disposition:                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                         |                                         |                   |                     |                         |                     | _                 |                |                       |                            |                                                     |                               |                           |
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| 79. Year:                         | 80. Mako                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <u></u>                 |                                         | YessLJ<br>81, Mod | No:□                |                         | 82. Vehis           | cle Style:        |                | 1 83. # of L          | 0015:                      | 84. Color:                                          | /·<br>85. Star:               | <b>-</b>                  |
| 17. 164.                          | us: ;viii                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                         |                                         | ĺ                 |                     |                         | Ĺ                   | _                 |                |                       |                            |                                                     |                               |                           |
| 86. V.I.N:                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                         | _                                       | 87. Li∞           | nse Plate:          | *                       | 8. State:           | 89. 1             | )OD D          | cal Number            | •                          |                                                     |                               |                           |
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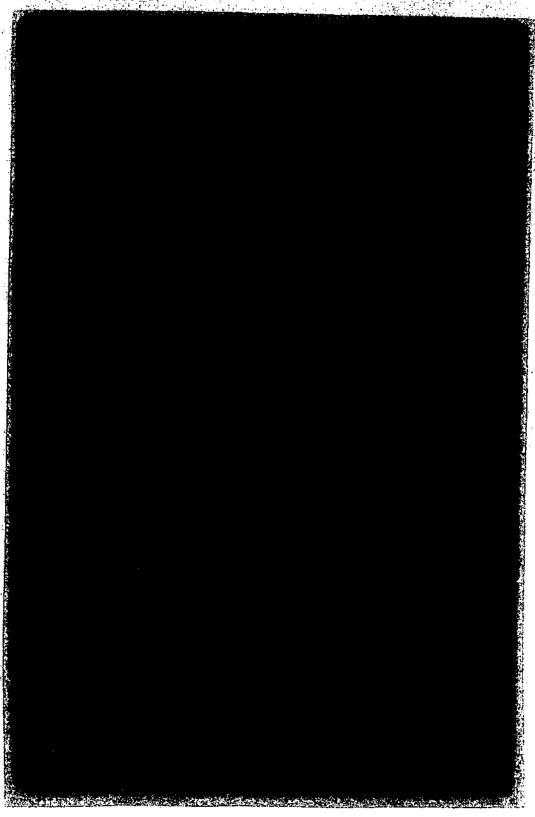
#### Referred to:

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

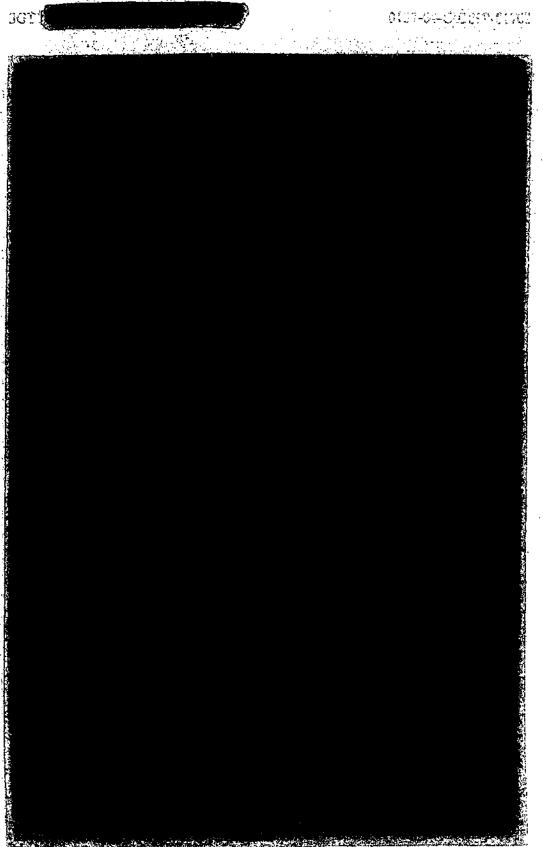
MS. JACQUELINE SCOTT scotti@centcom.smil.mil (813) 827-5341/2830

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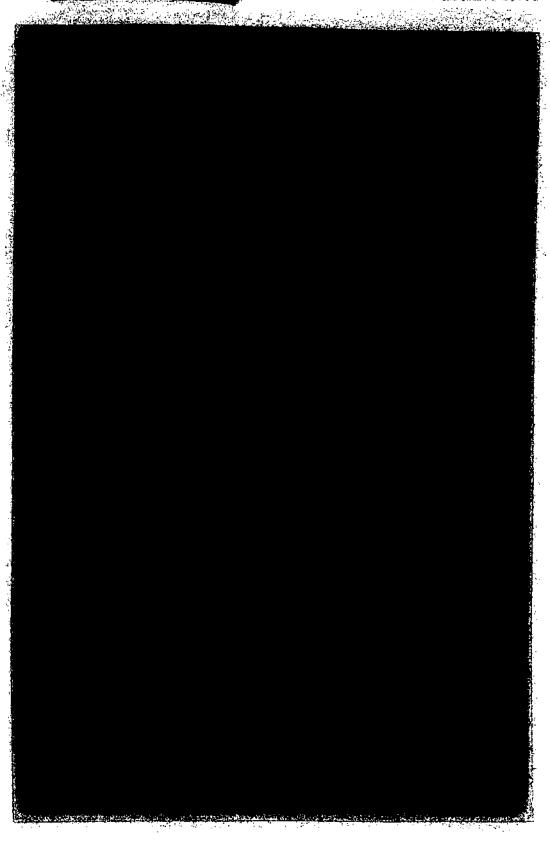
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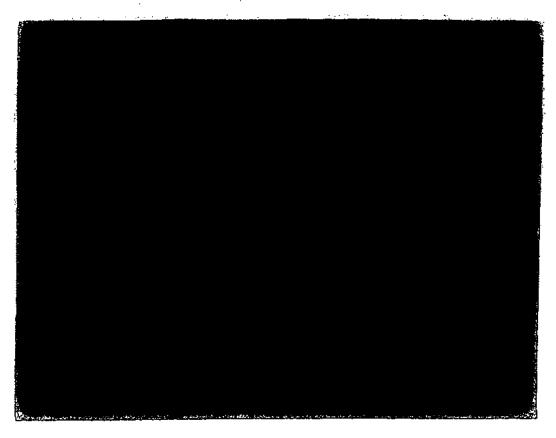
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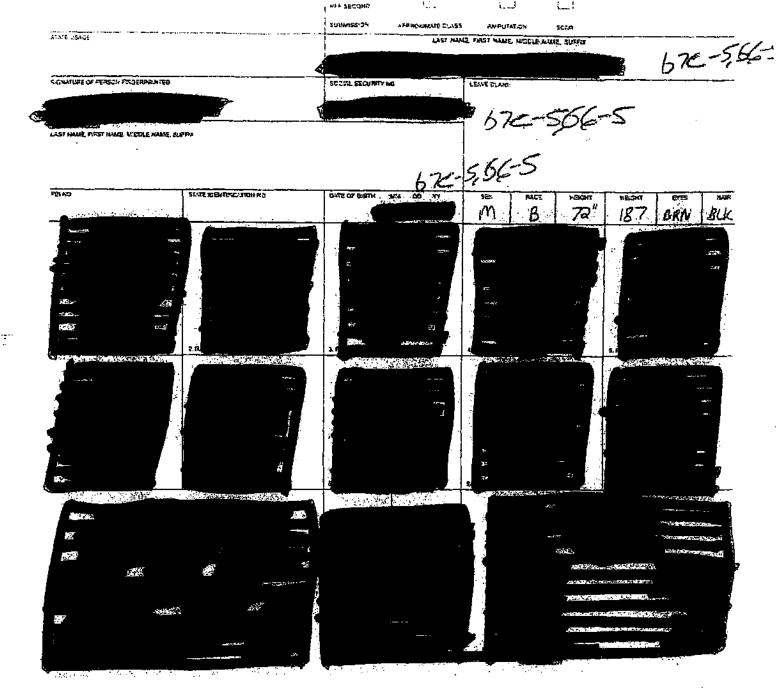


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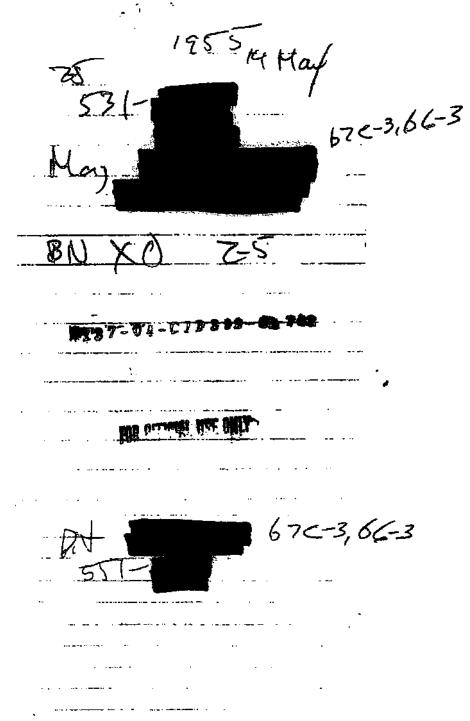
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