

EPW / Detainee Guide

SEARCH for weapons, documents. After thorough search, person must be allowed to maintain:

- Protective clothing
- Shoes or shoe laces
- helmet
- ID card
- rank
- wallet
- personal items (jewelry, watch, pictures)
- rucksack / luggage

- Secure all other items for S-2 for exploitation (maps, orders, diagrams, etc.)

SILENCE do not allow detainees to talk to each other. Gag only when necessary, and pay CLOSE attention to these individuals.

SEGREGATE the detainees by rank, sex, military from civilian, hostile from cooperative, etc.

SAFEGUARD detainees from danger on the battlefield, and from any reprisals by U.S. Forces or other detainees. It is our obligation to protect them from harm.

SPEED ensure all detainees are evacuated to collection points in timely manner, given the tactical and logistical situation.

TAG ensure all items found on detainee are recorded and placed in the same bag, along with a capture tag. Do not allow detainees to "sterilize" themselves by throwing away notebooks, money, cell phones, etc! Place one tag on detainee, one with gear, and retain one for records. This will also serve as a temporary receipt for the confiscated gear.

ENSURE the following is on capture tag:

1. DTG of capture
2. Place of capture (grids, town, street corners, specific bldg, etc)
3. Circumstances of capture (gave up without a fight, fought bravely, ran away, comforting dying comrades)
4. ALL documents / items found by capturing unit

Legal Obligations to EPW

HANDLE PERSON FIRMLY, PROMPTLY, AND HUMANELY

An EPW is a non-combatant, and you are obligated to protect him from the effects of the battlefield. The captive in your hands must be disarmed, secured, and watched, but he must also be treated at all times like a human being. He must not be tortured, killed, or degraded.

You ARE permitted to use the minimum amount of force necessary to make the detainee comply with instructions and to assure the safety of yourself, your fellow Soldiers, and other prisoners.

MISTREATMENT OF A CAPTIVE IS A CRIMINAL OFFENSE

It is dishonorable and foolish to mistreat a captive. It is also punishable under international treaty (which is Federal Law) and the UCMJ. Also remember that commanders are ultimately responsible for the conduct of their troops!!!

TREAT SICK / WOUNDED CAPTIVES AS BEST YOU CAN

The captive saved may possess valuable intelligence. In any case, he is protected under the Geneva Conventions and has a right to medical treatment. Enemy medical personnel can provide medical care for EPWs. Daily food and water rations must be provided in order to prevent weight loss or nutritional deficiencies.

ALL DETAINEES ARE CONSIDERED EPW'S AT OUR LEVEL

All detainees will be given the protected status of an EPW. An EPW or detainee cannot renounce his status, or switch sides to fight for the U.S.

REMEMBER. THE TAKING OF WAR SOUVENIRS IS STEALING !!!

6233

EPW Matrix & Definitions

	Protection	Medical Care	ID Card	Relief agency visit	Complaints	Food / Water	Clothing	Shelter	Religious Activities	Reporting to EPW Agency	Tribunal to Determine Status	Mail	Capture Card	Compensation	Representation	Repatriation	Parole
GPW Article	12 - 16	13,15 20,30 31,46	17	125	78	26, 34	27	21 - 25	34, 38	122	5	70 - 77	70	60 - 63	79	109, 110, 118	21
Immediately after capture	X	X	X	X	X												
Within the shortest possible time						X	X	X	X	X	X						
Day 7												X	X				
Day 30														X			
6 Months (Day 180)															X		
End of Hostilities																X	
No Obligation, but permissible at any stage																X	X

- SECURITY AND SAFETY OF EPWS, GUARDS, AND OTHER PERSONNEL IS ALWAYS THE MAIN CONCERN !!!

Article 5 Tribunal - U.S. policy is to convene a 3 member panel which will make a factual determination of the status of the detainee. The panel does not determine punishment. It is also U.S. policy to treat all detainees with the same status as EPWs until their status has been determined.

Capture Card - A baseline of recorded data that should be maintained about an EPW. The recommended form contains fourteen (14) items: (1) power on which the prisoner depends, (2) name, (3) first names (in full), (4) first name of father, (5) date of birth, (6) place of birth, (7) rank, (8) service number, (9) address of next of kin, (10) taken prisoner on: (or) coming from (camp number, hospital), (11) (a) good health (b) not wounded (c) recovered (d) convalescent (e) sick (f) slightly wounded (g) seriously wounded, (12) present address is: [prisoner number and name of camp], (13) date, and (14) signature. Prisoners are only required to fill in items two, three, five, seven, and eight. If for example, the prisoner is concerned that his family may suffer repercussions due to his capture or surrender, he is not required to provide his father's name or address of next of kin. GPW Article 70.

Clothing - Adequate clothing must be provided considering climate. EPWs may use their own uniforms.

Compensation - The detaining power shall grant all EPWs a monthly advance of pay based upon their rank. Article 60 of GPW establishes the amounts. EPWs shall also be paid for their labor, special skills, or services, at least one Swiss franc for a day's worth of labor. Labor rates should be established prior to the commencement of labor activities. EPWs can also receive monies from abroad, and may send their monies abroad. The detaining power can maintain control of the money by creating accounts for each EPW. Payments by the detaining power can be in the form of credits to the EPWs account.

Detainees - Persons in custody who have not been classified as an EPW, RP, or CI. All detainees shall be treated as EPWs until a legal status is ascertained by competent authority, such as an Article 5 Tribunal.

Detaining Power - Party who secures capture of EPW and thus gains responsibility for their treatment and security under the Geneva Convention.

Enemy Prisoner of War - A detained person as defined in Articles 4 and 5 of the Geneva Convention Relative to the Treatment of Prisoners of War of August 12, 1949. In particular, one who, while engaged in combat under orders of his or her government, is captured by the armed forces of the enemy. As such, he or she is entitled to the combatant's privilege of immunity from the municipal law of the capturing state for war like acts which do not amount to breaches of the law of armed conflict. A prisoner of war may be, but is not limited to, any person belonging to one of the following categories who has fallen into the power of the enemy: a member of the armed forces, organized militia or volunteer corps; a person who accompanies the armed forces without actually being a member thereof; a member of a merchant marine or civilian aircraft crew not qualifying for more favorable treatment; or individuals who, on the approach of the enemy, spontaneously take up arms to resist invading forces.

EPW Branch Camp - A subsidiary camp under supervision and administration of the main EPW camp.

EPW Camp - A camp set up by the U.S. Army for the separate internment and complete administration of EPWs. Camps shall not be located near military targets and should be clearly marked with the letters PW, PG, or other recognizable and visible marking.

Food Accommodations - Basic food rations shall be sufficient in quantity, quality, and variety to keep EPWs in good health while preventing the loss of weight or development of nutritional deficiencies. Account shall be taken for the habitual diet of the EPW, therefore no pork MREs or meals should be fed to Muslims. EPWs may use their own foodstocks and prepare their own food.

GPW - Geneva Convention Relative to the Treatment of Prisoners of War. August 12, 1949 (GENEVA CONVENTION III). Entry into Force: 21 October 1950

ID Cards - Identification cards are only required to contain name, rank, serial number, and date of birth. The Convention also allows a party to place any other information that it wishes on the card and specifically mentions the owner's signature or fingerprints as examples. The EPW must keep the ID Card in his possession at all times. As far as possible, the card should measure 6.5 X 10 cm. GPW Article 17.

Mail - No later than one week after capture, an EPW shall be able to write directly to his family, and shall also be entitled to receive mail. At a minimum, the capture card shall be mailed to notify the family. The detaining party can limit mail to 2 letters and 4 cards each month. No postage is required. Telegrams may also be permitted. Censorship with all communications is authorized, but must be conducted as quickly as possible.

Medical Care - The GPW requires that all wounded and sick shall be collected, cared for, and generally provided humane treatment. Medical inspections must be conducted at least once a month. GPW also requires that EPWs suffering from serious disease or injury must be admitted to a medical unit that can provide such care. In addition to these protections, the Geneva Convention for the Amelioration of the Condition of Wounded and Sick in Armed Forces in the Field (GWS) mandates any wounded and sick shall be collected and cared for, and furthermore encourages parties to search for the wounded and sick on the battlefield.

Military Activities - Activities intended primarily or exclusively for military operations as contrasted with activities intended primarily or exclusively for other purposes.

Military Nature - Term that applies to those items or those types of construction that are used exclusively by members of the Armed Forces for operational purposes (e.g., arms, helmets). The purposes are in contrast to items or structures that may be used either by civilian or military.

Parole - Parole is used in the international law sense of releasing a prisoner of war (PW) in return for a pledge not to bear arms.

Personal Effects - An EPW shall be allowed to retain personal effects. Personal effects the EPW may retain include the following:

- a. Clothing.
- b. Mess equipment (Knives and forks excluded)
- c. Badges of rank and nationality.
- d. Decorations.
- e. Identification cards or tags.
- f. Religious literature.
- g. Articles that are of a personal use or have a sentimental value to the person.
- h. Protective mask.

Prisoner of War Information Center (PWIC) - A TOE organization established to collect information pertaining to EPW, RP and CI and to transmit such information to the National Prisoner of War Information Center.

Protection - Protection from violence, intimidation, insults, and public curiosity. This includes protection on the battlefield and intrusions from the press.

Relief Agency - A non-governmental agency such as the International Committee for the Red Cross or Doctors Without Borders.

Religious - EPW's shall have complete latitude in practicing their religious faith and may be attended to other EPWs.

6236

Repatriation - Releasing an EPW back to his host nation. EPW must be repatriated as soon as hostilities end. However, the Detaining power cannot force an EPW to repatriate. Also, repatriation is required before cessation of hostilities for:

a. Seriously sick and wounded EPWs whose recovery is expected to take more than 1 year (Art. 110, GPW); *

b. Incurably sick and wounded (Art. 110, GPW); or *

c. Permanently physically or mentally disabled (Art. 110, GPW)

* No sick or wounded EPW may be repatriated against his will.

** Retained personnel are to be repatriated as soon as they are no longer needed to care for the prisoners of war.

Reporting Requirements - The name, rank, date of birth, and service number. The detaining power has a duty to report, if available, the following additional information: father's first name, mother's maiden name, name and address of person to be notified, name of camp and postal address, information regarding transfers, releases, repatriations, escapes, admissions to hospitals, deaths, and information about the prisoner's state of health. Of these items, the only information that the prisoner is not under a duty to provide and may not be readily available to the detaining power is the information about the next of kin. If a prisoner is concerned for the safety of his or her family, the prisoner is not required to provide this information. GPW Article 122.

Retained Personnel - Enemy personnel who come within any of the categories below are eligible to be certified as retained personnel (RP).

a. Medical personnel who are members of the medical service of their armed forces.

b. Medical personnel exclusively engaged in the—

(1) Search for, collection, transport, or treatment of, the wounded or sick.

(2) Prevention of disease.

(3) Staff administration of medical units and establishments exclusively.

c. Chaplains attached to enemy armed forces

d. Staff of National Red Cross societies and other voluntary aid societies duly recognized and authorized by their governments. The staffs of such societies must be subject to military laws and regulations.

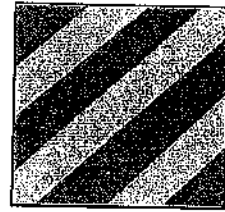
e. Of note, retained status is not limited to doctors, nurse, corpsman, etc. It also includes, for example, the hospital clerks, cooks, and maintenance workers.

* Retained personnel are to be repatriated as soon as they are no longer needed to care for the prisoners of war.

Shelter - EPWs may be interned only on land and afforded every guarantee of hygiene and healthfulness. Except in rare cases, they shall not be interned in penitentiaries. EPWs interned in unhealthy or dangerous areas shall be removed as soon as possible to a more favorable location.

FRONTLINE

Forward



Vol. 1 No. 13

Serving the Forward elements of the 3rd ID (M)

Feb. 26, 2003

3rd MPs round 'em up

Marne police train to tackle EPW issues

Spc. Katherine Robinson
50th PAD

On a cloudy Kuwaiti afternoon, a line of dirty, dejected looking prisoners wait on their knees, hands behind their heads, to be herded into trucks for transportation.



An EPW receives a numbered identification bracelet.

The guards keep a close eye and a rifle constantly trained on the prisoners as they load them in the truck and cart them off to be searched and searched again before finally receiving food, blankets, medical care and a place to sleep.

The 3rd Military Police Battalion conducted internment and resettlement training Feb. 17 and 18 in preparation for possible future operations.

See EPW, Page 8

Move out! 203rd FSB strives to keep up with division's war zone needs

Spc. Jacob Boyer
3ID (M) PAO

There are many things a task force of soldiers need to keep fighting – medical aid, vehicle maintenance and a multitude of other supplies.

If a task force moves quickly, its support needs to be able to keep up with its needs in a war zone.

The 203rd Forward Support Battalion ensures the 3rd Brigade Combat Team gets all the support it needs when it is time to move out. The battalion held a field exercise Feb. 9-13 to make sure its soldiers were prepared to move the brigade support area rapidly if the brigade needs to move forward.

"Setting up and tearing down the BSA quickly is critical," said Maj. Jim

Stanford, operations officer, 203rd FSB. "The brigade moves fast, and this is the most lethal division in the world. If we can't keep up, then they come to a halt. They can't continue to fight."

The battalion consists of four companies. In addition to a headquarters element, there are three companies with



Photos by Spc. Katherine Robinson

Spc. Robert Bedford (right), a 3rd MP Bn. soldier from Winters, Texas, searches the bag of an "enemy prisoner of war," played by Spc. Dustin Davis, a fellow MP, from Wichita, Kan., during the battalion's internment and resettlement training Feb. 18 at Camp New York.

See FSB, Page 9

6238
6238

EPW, from page 1

According to Master Sgt. Tony McGee, 3rd Infantry Division (Mech.) Provost Marshal operations sergeant, handling of enemy prisoners of war is one of the MPs main missions. "It consumes most of what we do," he explained.

The battalion set up a central collection point on Camp New York. The area was divided into several sections, exactly as they would be in a real-world situation, except on a significantly smaller scale, said McGee, a Florence, S.C., native.

The area included a central holding area, a segregated holding area divided by rank, a search area, inprocessing stations and barracks.

The MPs learned to transfer, maintain security, and account for prisoners, their belongings and their weapons.

If a war occurs, a large number of EPWs are expected, McGee said. "These guys' ability to handle that number and do it proficiently is extremely important. We've got to get (the prisoners) off the battlefield and protect them."

After a walk-through of the area and several briefings on the first day, the real training began on the Feb. 18. At forward collection points, the soldiers corralled prisoners, played by other MPs, searched them for weapons and took them to the central collection point in troop carriers.

The EPWs were searched again at the gate and moved into either the consolidated holding area or, if they needed medical attention, an aid station.

From there, another squad took the prisoners through inprocessing where they had their personal items inventoried and paperwork filled out. They re-



Spc. Katherine Robinson

A line of simulated enemy soldiers, played by MPs, sit waiting to be transported to the central collection point during the training.

ceived food, water and a blanket. They also received bracelets, with numbers that corresponded to their paperwork.

While some of their belongings were temporarily confiscated, the prisoners were allowed to keep badges of rank and nationality, religious literature and items of personal or sentimental nature.

Treating the EPWs correctly while handling them efficiently is very important, said Command Sgt. Maj. Charles D. Medley, 3rd MP Bn. command sergeant major, from Huntsville, Ala.

"One of the primary differences between the United States Army and many of our adversaries is that we treat EPWs with dignity and respect while maintain-

ing security," he said. Many enemy soldiers would rather be fed and housed by American MPs because they know they won't be mistreated, Medley added.

"We reinforce that with the MPs constantly," he said. "EPWs are soldiers, they're on the other side, but they're still human beings ... they will receive the same medical care as a U. S. Army soldier."

Sometimes enemy soldiers who surrender will cooperate because they're hungry and thirsty, said Pvt. 2 Ashley Hargett, an MP from Hutchinson, Kan. "I learned that some will resist and often that's because they're scared. You have to be aware of your surroundings."

Hargett said the training helped her know what to possibly expect.

"It's good training. It lets us know what we need to do and what we need to change," she said.

Though she's nervous about the prospect of having to put her training to use in a real-world situation, Hargett said she's not scared.

"I have a lot of confidence in my team," she said. "My team knows what they're doing. There's a lot of experience here."

The soldiers have the experience of many previous deployments to many different places, according to Medley, who said he shared Hargett's feelings of confidence.

"No other MP company in the United States has sent as many people to as many places (since Sept. 11, 2001) as the 3rd MP Battalion," he said.

"We're here to do a job, and when it's finished, we'll be glad to go home," he added. "I've had zero soldiers complain ... I couldn't be prouder."

DIVARTY, from page 7

on the same software, they can fire more accurately and communicate better.

Before the DIVARTY TOT, the units went through fire support rehearsals and technical rehearsals. The fire support rehearsal tested communications, observers and reviewed target orders. The tech-

nical rehearsal gave the crews a dry run where they tested commands, fire orders and targeting.

Should the division be called on for military action toward Iraq, mass fires may will be essential.

"You can kill more if you can mass

artillery," Williams said. "You're ability to mass artillery demonstrates your ability for violent fires on one area. The 3rd ID DIVARTY is prepared to execute the full spectrum of our missions, and DIVARTY will prosecute violently all missions requiring fire support."



DEPARTMENT OF THE ARMY
HEADQUARTERS 4TH INFANTRY DIVISION (MECHANIZED)
OFFICE OF THE STAFF JUDGE ADVOCATE
FORT HOOD, TX 76544-5000

REPLY TO
ATTENTION OF:

AFYB-JA-AL

26 July 2003

MEMORANDUM FOR Commander, 4th Infantry Division (Mechanized), Fort Hood, Texas 76544

SUBJECT: AR 15-6 Investigation – Legal Review

1. In accordance with AR 15-6, paragraph 2-3, I have reviewed the AR 15-6 investigation into the facts and circumstances surrounding the 22 July 2003 death of a prisoner held in the Division Central Collection Point. I make the following determinations:
 - a. The proceedings comply with the legal requirements.
 - b. Errors in the proceedings, if any, do not have a material adverse effect on any individual's substantial rights.
 - c. Sufficient evidence supports the findings.
 - d. The recommendations are consistent with the findings.
2. The investigation is legally sufficient.
3. The point of contact is the undersigned at (DNVT) 534- [REDACTED] (b)(6)-2

[REDACTED SIGNATURE] (b)(6)-2
CPT, JA
Administrative Law Attorney

FOIA

REPORT OF PROCEEDINGS BY INVESTIGATING OFFICER, BOARD OF OFFICERS

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

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

SECTION I - APPOINTMENT

Appointed by MG RAYMOND ODIERNO
(Appointing authority)

on 22 JULY 03 (Date) (Attach inclosure 1: Letter of appointment or summary of oral appointment data.) (See para 3-15, AR 15-6.)

SECTION II - SESSIONS

The (investigation) (board) commenced at TIKRIT, IRAQ at 1200
(Place) (Time)

on _____ (Date) (If a formal board met for more than one session, check here . Indicate in an inclosure the time each session began and ended, the place, persons present and absent, and explanation of absences, if any.) The following persons (members, respondents, counsel) were present: (After each name, indicate capacity, e.g., President, Recorder, Member, Legal Advisor.)

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

(investigating officer) (board) finished gathering/hearing evidence at _____ on _____
(Time) (Date)

completed findings and recommendations at _____ on _____
(Time) (Date)

SECTION III - CHECKLIST FOR PROCEEDINGS

COMPLETE IN ALL CASES

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

^{1/} Explain all negative answers on an attached sheet.

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

6211

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

6242

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

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

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

FACTS:

Prisoner #1085 A.K.A. [redacted] died at approximately 0445D on 22 July 2003 at the TFCCP. According to multiple parties the deceased had been helped to the latrine for nausea by two other prisoners just prior to his death. After leaving the latrine, the deceased lost consciousness and was carried back to his tent. The prisoners then alerted [redacted] and [redacted] who checked on the prisoner. The prisoner was unconscious with what was felt to be a weak pulse. [redacted] [redacted] who instructed [redacted] to get a medic. [redacted] 4th MP [redacted], responded and did not feel a pulse. [redacted] senior medic, was notified and responded with [redacted] from the aid station. The prisoner was pronounced dead at 0545.

The deceased had been held at the DCCP since 27 June 2003. During this time he had sought medical attention from MP medics on multiple occasions. According to the MP daily log, the deceased had been seen on 02 July for chest pain. The deceased was taken to the aid station and eventually to the 28th CSH for treatment. The deceased was seen by a cardiologist at the 28th CSH and diagnosed with coronary artery disease, angina and type II diabetes. The prisoner was discharged back to the DCCP with medications. Prisoner #1087 stated that he had taken care of the deceased since his arrival at the DCCP. He further stated that the deceased had advanced coronary artery disease and had some sort of procedure done last year (presumably angioplasty since there was no chest scar indicating bypass surgery) and was allegedly scheduled to have a second procedure done in April of this year. The deceased had received his medications regularly during his stay in the DCCP. The deceased had also been seen on 03 July for vomiting, was treated and released by the MP medics, seen 16 July for passing out, treated and released by MP medics, and 19 July for dehydration, treated and released by MP medics. [redacted] stated that the deceased had not been feeling well for the last 4-5 days and had been feeling weaker and was unable to eat. The [redacted] before his death, the deceased had complained of abdominal pain. [redacted] stated he told the guard, and the deceased was given an aspirin. Several MP's verified that the deceased had not been feeling well for the past one to two weeks. The MP's also verified that the deceased had to have help going to the latrine during the last 2-3 days.

An autopsy was performed on the deceased by [redacted] province. The autopsy did not reveal any external or internal signs of trauma. The cause of death was listed as congestive heart failure. This was most likely secondary to a myocardial infarction (heart attack).

The MP medics are utilized for sick call and treating the EPW's within the DCCP, although this is not their primary responsibility. They have very limited assets for patient care. All EPW's with medical complaints are screened by MP Medics. The medics then decide who should be seen at the aid station or whether a higher medical personnel should be consulted.

EPW's are not screened for medical problems when they are placed in the DCCP and there was no medical record keeping prior to the death of this prisoner.

FINDINGS:

The deceased prisoner more than likely suffered a myocardial infarction and developed congestive heart failure which reached a critical point prior to his death. (C) The patient had a known history of coronary artery disease. (M) His last contact with the MP medics was on 19 July, 2 days prior, for dehydration. The prisoner also allegedly complained of abdominal pain with nausea and vomiting during the days preceding his death, which are symptoms consistent with his disease. (M) According to the autopsy report there was no evidence of foul play or traumatic injury. (C) The MP medics are ill suited to handle complex medical patients and provide sick call to the EPW's as well as carry out their primary mission of supporting the MP unit. (P)

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

In view of the above findings, the (investigating officer) (board) recommends: There should be no disciplinary action taken against the MP medics or other. The MP medics should not be used as the primary care giver for the EPW's. A physician's assistant or other higher medical authority should be assigned to provide sick call and medical care for the prisoners at the DCCP. This will allow the MP medics to accomplish their mission of providing medical support for their unit and remove them from the primary care giver of the EPW's. If providing a Physician's assistant is not possible, a formal Standard operating procedure should be established for the MP medics to operate under in providing care for the EPW's with direct oversight by physician's assistant or other higher medical authority. In addition a system to identify complex medical patients, medical screening of patients and tracking of medical problems should be instituted for the DCCP. This would however place even more of a burden on the MP medics and keep them from accomplishing their primary mission of medical support for the MP unit.

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

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

b6-2



(Recorder)

(Investigating Officer) (President)

(Member)

(Member)

(Member)

(Member)

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

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

(Member)

(Member)

SECTION VIII - ACTION BY APPOINTING AUTHORITY (para 2-1, AR 15-6)

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

Raymond A. [Signature]

4 AUGUST 2003



DEPARTMENT OF THE ARMY
418TH CIVIL AFFAIRS BATTALION
4th ID (M) HHC G-5 UNIT # 92528
APO, AE. 09323-2628

[REDACTED]

b6-2
b7c-2

August 2, 2003

MEMORANDUM FOR: Staff Judge Advocate General

SUBJECT: Prisoner Death Investigation

b6-4, b7c-4

I. The inability of the prisoner [REDACTED] to receive nitroglycerin would not have precluded his imminent demise.

[REDACTED]

b6-2
b7c-2

Exhibit List
Investigation of Prisoner Death # [REDACTED] on 22 July 2003

b6-4
b7c-4

- A. Appointment letter
- B. MP Incident Report
- C. Autopsy Report
- D. [REDACTED] statement
- E. [REDACTED] statement
- F. [REDACTED] statement
- G. [REDACTED] statement
- H. [REDACTED] statement
- I. [REDACTED] statement
- J. [REDACTED] statement
- K. MD notice of death
- L. Medical record 02 July 03
- M. Prisoner #1087 statement
- N. Medication packets
- O. EPW Screening report
- P. Q and A with [REDACTED]



b6-4
b7c-4

b6-4
b7c-4



DEPARTMENT OF THE ARMY
HEADQUARTERS TASK FORCE IRONHORSE
TIKRIT, IRAQ

REPLY TO
ATTENTION OF

AFYB-CS

22 July 2003

MEMORANDUM FOR [REDACTED] b6-2

SUBJECT: Appointment of Investigating Officer

1. You are hereby appointed an investigating officer pursuant to AR 15-6 to conduct an informal investigation into the facts and circumstances surrounding the 22 July 2003 death of a prisoner held in the division's central collection point.
2. You will use informal procedures under AR 15-6, Chapter 4. You will make specific findings and recommendations on all relevant issues you identify in the course of your investigation. If, during your investigation, you suspect that persons you intend to interview may have violated any provision of the Uniform Code of Military Justice (UCMJ) or any other criminal law, you must advise them of their rights under the UCMJ, Article 31, or the Fifth Amendment, as appropriate. Rights warnings and waivers will be documented on DA Form 3881. Provide each witness a Privacy Act statement before you solicit any personal information. All witness statements will be sworn and recorded on DA Form 2823.
3. Prepare the report of proceedings on DA Form 1574 and submit the original to me within 72 hours of receipt of this memorandum. You must submit any requests for delay to me in writing. Include with your report all documentary evidence, sworn statements, and other information or evidence you considered.
4. Before proceeding with the investigation, contact [REDACTED] at [REDACTED] for an initial legal briefing. [REDACTED] will serve as your primary legal advisor. b6-2
5. If during the course of your investigation you discover systemic training, maintenance, and/or equipment design deficiencies that potentially caused or contributed to the incident under investigation, you will immediately contact your legal advisor for further guidance. b6-2

FOR THE COMMANDER:

[REDACTED] b6-2

6247

A

Type of Report: Initial

Date/time of report: 22 0815 JUL 03

Date/time of incident: 22 0515 JUL 03

Location of incident: LD 80132903 (TF IH CCP-Tikrit Main Palace)

Unit involved in the incident: 5th Platoon, 4th Military Police Company

Name of senior person involved in incident and contact information: [REDACTED]

b6-2/
b7c-2

Narrative of Incident: Enemy Prisoner of War Detainee #1085, [REDACTED] 60 year old local national had been detained in the TFCCP since 27 June, 2003. Individual was detained for possession of numerous weapons and a large quantity of ammunition. The detainee was seen by 4th MP Company medics approximately 3 times for health issues such as dehydration, his refusal to eat on numerous occasions, however there was no indication of any serious illness or injuries due to his stable vital signs during each checkup by 4th MP Medics. The individual was on multiple unknown medications upon his arrival to the TFCCP. At approximately 0500, the detainee was assisted by two other detainees (# [REDACTED] and # [REDACTED]) to utilize the latrine due to vomiting. On the way out of the latrine, the detainee collapsed and was carried back to the detainee tent by the two detainees, who stated to the 2 MP's [REDACTED] that the detainee was dead. The [REDACTED] of the outer portion of the camp [REDACTED] was notified, and he ordered [REDACTED] to go summon a medic from 4th MP HQ. [REDACTED] went into the cage and was informed by [REDACTED] and [REDACTED] that he had a low pulse. [REDACTED] checked for responsiveness and pulse and did not detect response or pulse. [REDACTED] Medic 4th MP Company arrived on scene and verified that there was no pulse or signs of life, and [REDACTED] a Doctor at the Tikrit Main Palace TMC arrived and pronounced the detainee dead at 0540 hours.

b6-4/
b7c-4

b6-1/
b7c-1

b6-1/
b7c-1

b6-1/
b7c-1

b6-2/
b7c-2

b6-2/
b7c-2

Friendly Casualties: N/A

Enemy Casualties: N/A

EPWs: Deceased of unknown causes

What are the unit's future actions:

b6-1 b7c-1

POC name and contact information: [REDACTED] 4th MP Company at [REDACTED]

Satah Aldin Forensic medicine

Dissection Report



Name

age

60 years

66-4
676-4

External examination:

Good built, gray hair, no any external trauma to different parts of the body.

Internal examination:-

Congestion and Oedema of all internal structures.

Heart: weight 600 grams shows thickening of the walls and dilatation of heart chambers.

Lungs congested and oedematous with multiple black stains and adhesions to pleura.

Liver small in size gray in colour with signs of fibrosis (cirrhosis)

Kidneys hypertrophy lobulated and each weight is 300 grams

Stomach contain small amount of digested food.

Conclusion:-

1. The cause of death is Congestive heart failure
2. No any internal trauma



66-4
676-4

6240

SWORN STATEMENT

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

LOCATION TRICAT, IAAQ	DATE 22 JUL 03	TIME	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]	GRADE/STATUS [REDACTED]	
ORGANIZATION OR ADDRESS [REDACTED]			

b6-4/
b7c-4/

b6-4/
b7c-4/

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

ON 22 JUL 03 AT APPROXIMATELY 0504 I WAS NOTIFIED BY [REDACTED] THAT AN EPW (LATER IDENTIFIED AS # [REDACTED]) HAD FALLEN OUT IN THE OUTSIDE CAGE. [REDACTED] AND I ENTERED THE NORTHEAST CAGE AND APPROACHED THE FALLEN EPW BY WAY OF [REDACTED] AND I WERE BRIEFED BY [REDACTED] OF THE SITUATION AND WERE TOLD THE EPW STILL HAD A PULSE BUT WAS LAYING MOTIONLESS. [REDACTED] CHECKED FOR A PULSE ON THE EPW'S NECK AND INFORMED ME HE FELT NOTHING. I THEN TOLD [REDACTED] MEDIC FROM HQ AND ORDERED THE REMAINING EPWS TO GET OUT OF THE TENT AND INTO THE NORTHEAST TENT. ONCE ALL EPWS WERE OUT OF THE TENT, I PLACED A GAUZE ON THE BODY AND NOTIFIED [REDACTED] THE SITUATION AND [REDACTED] THAT I WAS STILL CONDUCTING MY PT TEST THAT MORNING AND DEPARTED THE A.O.

b6-4/
b7c-4/

b6-4/
b7c-4/

b6-4/
b7c-4/

b6-2
b7c-2

EXHIBIT

INITIALS OF PERSON MAKING STATEMENT
[REDACTED]

PAGE 1 OF 2 PAGES

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

DA FORM 2823, JUL 72

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

USAPPC V2.00

6250

TASK FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

DATE: 24 JUNE 03

b6-4 / b7C-4

I, [REDACTED], understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation.

Signature [REDACTED]

Name: [REDACTED]

Rank: [REDACTED]

Unit: [REDACTED]

b6-4
b7C-4

SWORN STATEMENT

For use of this form, see AR 190.45; the proponent agency is ODCSOPS

LOCATION

DCCP Tropic Trng

DATE

200306

TIME

FILE NUMBER

LAST NAME, FIRST NAME, MIDDLE NAME

SOCIAL SECURITY NUMBER

GRADE/STATUS

ORGANIZATION OR ADDRESS

I, [redacted] want to make the following statement under oath:

On 22 July 03, at 0500 [redacted] and I were doing latrine burning detail. When we noticed detainee [redacted] went into the latrine. When [redacted] detainee [redacted] # was done and left to detainee [redacted] collapsed. Other detainees moved detainee [redacted] to his tent. I then went to check on detainee [redacted] # I noticed a very faint pulse. [redacted] and notified [redacted] [redacted] went down. [redacted] then checked [redacted] detainee [redacted] went weak pulse also. When [redacted] noticed a detainee [redacted] pulse and noticed none. [redacted] told [redacted] to get the medic ([redacted]) I [redacted] then returned to my latrine burning detail.

b6-1 / b7C-1

b6-4 / b7C-4

b6-1 / b7C-1

b6-4, b7C-4

b6-1 / b7C-1

EXHIBIT

INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 3 PAGES

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

DA FORM 2823, JUL 72

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

USAPPC V2.00

6252 E

TASK FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

DATE:

I, _____, understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature

Name:

Rank:

Unit:

6253

SWORN STATEMENT

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

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION: DCCP Tikrit, Iraq
2. DATE (YYYYMMDD): 24630724
3. TIME: 1724
4. FILE NUMBER: B6-4
5. LAST NAME, FIRST NAME, MIDDLE NAME: B6-4
6. SSN: B6-4
7. GRADE/STATUS: B6-4

8. ORGANIZATION OR ADDRESS: B6-4
9. I, B6-4, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On the 22nd of July, around 0800H, B6-4 and myself were inside the wire on a latrine burning detail when we saw Detainee B6-4 with the assist of two other detainees, use the latrine. When he exited, he collapsed into their arms. They called for more detainees to help them carry him to his sleeping area. They then informed us he was not breathing, he was dead. I left B6-4 on site and went and notified B6-3. We entered the area and B6-4 said he felt a weak pulse. B6-3 checked and said he felt no pulse. Since they did not agree I then checked and I also felt no pulse. The wire was 0805H. We then moved all the detainees away from B6-4 to the next tent. B6-4 had by now arrived and checked for a pulse, none was found. Shortly afterwards, B6-4 had also arrived and checked for life, none was found.

Statement III
B6-4

10. EXHIBIT:
11. INITIALS OF PERSON MAKING STATEMENT: B6-4
PAGE 1 OF 1 PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT TAKEN AT DATED

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

6254

STATEMENT OF _____ TAKEN AT _____ DATED _____

9. STATEMENT (Continued)

AFFIDAVIT

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

 86-4/0704
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this ____ day of _____ at _____

ORGANIZATION OR ADDRESS

(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE OF PAGES

TASK FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

DATE: 24/3/74

B6-4/ b7c

I, [REDACTED], understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

B6-4/b7c 4

Signature: [REDACTED]

Name: [REDACTED]

Rank: [REDACTED]

Unit: [REDACTED]

B6-4/b7c-4

SWORN STATEMENT

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

PRIVACY ACT STATEMENT

AUTHORITY:

Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).

PRINCIPAL

To provide commanders and law enforcement officials with means by which information may be accurately identified.

ROUTINE USES:

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

DISCLOSURE:

Disclosure of your social security number is voluntary.

1. LOCATION

DCCP Tikrit IIRAC

2. DATE (YYYYMMDD)

2005/07/21

3. TIME

1715 HRS

4. FILE NUMBER

5. LAST NAME, FIRST NAME, MIDDLE NAME

6. SSN

7. GRADE/STATUS

8. ORGANIZATION OR ADDRESS

9.

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On the date of 7/22/2005, at approximately I observed a older male, dressed in dark gray clothing being carried from the restroom toilets by two other inmates. I followed in about 5 min. after the two inmates placed the male on his blanket, and I wondered as to why he was carried. I approached me and said I feel a pulse. I turned and went out to the guard tent and said that a inmate appears bad, find. Upon my return I entered the cage, and he would check pulse. The male appeared to not be breathing. I and other soldiers automatically began to move inmates away from the body. medic's arrived on scene, and medic assistance began, myself and other soldier's began to pull

b7c-4

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 5 PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING STATEMENT OF TAKEN AT DATED

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

B6-4/b7c-4

STATEMENT OF [REDACTED] TAKEN AT 1715 HRS DATED 07/24/2013

9. STATEMENT (Continued)

B6-4/b7c-4

AFFIDAVIT

I HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 3. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE OR UNLAWFUL INDUCEMENT.

B6-4/b7c-4

[REDACTED Signature of Person Making Statement]

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this _____ day of _____ at _____

ORGANIZATION OR ADDRESS

(Signature of Person Administering Oath)

(Typed Name of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

[REDACTED Initials]

B6-4/b7c-4

PAGE 3 OF 3 PAGES

6258 \

TASK FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

DATE: 07/24/2003

86-4 b7c-4

I, [REDACTED], understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation.

Signature: [REDACTED]

Name: [REDACTED]

Rank: [REDACTED]

Unit: [REDACTED]

} 86-4/
b7c-4

SWORN STATEMENT

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

LOCATION Tikrit Deep, IRAQ	DATE 22 Jul 03	TIME 0619	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	SOCIAL SECURITY NUMBER [REDACTED]	GRADE/STATUS B6-4	[REDACTED]
ORGANIZATION OR ADDRESS [REDACTED]	[REDACTED]	[REDACTED]	B6-4 b7c-4

B6-4
b7c-4

I, [REDACTED] B6-4 / b7c-4, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:
 ON 22 July 03 At Approximately 0503 [REDACTED] B6-4 / b7c-4 informed me of a detainee with a low pulse. At that point He ordered me to rush for a medic. I informed the medic. The medic came to scene and determined the [REDACTED] detainee had deceased.

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED] B6-4 / b7c-4	PAGE 1 OF 2 PAGES
---------	--	-------------------

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



TASK FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

DATE:

B6-4/ b7c-4

I, [REDACTED], understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature: [REDACTED]

Name: [REDACTED]

Rank: [REDACTED]

Unit: [REDACTED]

} B6-4
b7c-4

SWORN STATEMENT

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

LOCATION 4 th MP BCCP	DATE 24 July 03	TIME 1215	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED] B6-4	SOCIAL SECURITY NUMBER [REDACTED] B6-4	GRADE/STATUS [REDACTED] B6-4	

ORGANIZATION OR ADDRESS
[REDACTED]

I, [REDACTED] B6-4, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 22 July 03, at 0510, I was awakened by [REDACTED] B6-4, stating they needed a medic at the EPW cage. I asked what was wrong and he told me the patient didn't have a pulse. I asked was he breathing he replied he didn't know and that he was just told to come get a medic. When I arrived at the EPW cage the patient, EPW # [REDACTED] B6-4, was covered with a blanket. I checked for a pulse and for breathing in which I found none. No one could tell me how long or when the EPW went down. I went and notified [REDACTED] B6-4 and [REDACTED] B6-4 from the air station. We all proceeded to the EPW cage where [REDACTED] B6-4 performed his evaluation of the prisoner. [REDACTED] B6-4 pronounced him dead at 0545.

070-4

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT [REDACTED] B6-4	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.

TASK FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

B6-4/b7c-4

DATE:

I, [REDACTED], understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature

Name

Rank

Unit

B6-4
b7c-4

6263

I

SWORN STATEMENT

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

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
PRINCIPAL: To provide commanders and law enforcement officials with means by which information may be accurately identified.
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION: DCCP Tikrit Iraq
2. DATE (YYYYMMDD): 2003 06 03
3. TIME: 03
4. FILE NUMBER:
5. LAST NAME, FIRST NAME, MIDDLE NAME: [REDACTED] B6-4
6. SSN: [REDACTED] B6-4
7. GRADE/STATUS: [REDACTED] B6-4
8. ORGANIZATION OR ADDRESS: [REDACTED] B6-4

9. I, [REDACTED] B6-4, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

ON 22 July 03, at 0503 I was notified by [REDACTED] B6-4 that [REDACTED] B6-4 Detainee [REDACTED] B6-4 had clasped and had a weak pulse. I then told [REDACTED] B6-4 to go get a medic from the Headquarters building and I went with [REDACTED] B6-4 into the EPW holding cell and made contact with [REDACTED] B6-4. [REDACTED] B6-4 also stated that [REDACTED] B6-4 was not being responsive. I then checked [REDACTED] B6-4 for a pulse and [REDACTED] B6-4 had a soft pulse and [REDACTED] B6-4 was not responsive. I then checked [REDACTED] B6-4 for a pulse and [REDACTED] B6-4 neck and did not get one. And I then [REDACTED] B6-4 felt that [REDACTED] B6-4 was not alive. I then had [REDACTED] B6-4 and myself separate the other detainees away from [REDACTED] B6-4 and all other detainees were put into a separate tent. By this time [REDACTED] B6-4 (Camp [REDACTED] B6-4) had arrived and also checking for responsiveness and did not get any. [REDACTED] B6-4 and [REDACTED] B6-4 then went and got [REDACTED] B6-4 and [REDACTED] B6-4 left to go and notify operations of the situation. [REDACTED] B6-4

10. EXHIBIT:
11. INITIALS OF PERSON MAKING STATEMENT: [REDACTED] B6-4/b7c-4
PAGE 1 OF 3 PAGES

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

6284

B6-4/b7c-4

STATEMENT OF [REDACTED] TAKEN AT 22 July 03 DATED 22 July 03

9. STATEMENT (Continued)

Not Used

B6-4/b7c-4

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 3. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED] B6-4/b7c-4
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 22 day of July, 2003 at DCAP, Jinkir, Iraq

[REDACTED] B6-2
(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Typed Name of Person Administering Oath)

ORGANIZATION OR ADDRESS

(Authority To Administer Oaths)


INITIALS OF PERSON MAKING STATEMENT



TASK FORCE IRONHORSE
HEADQUARTERS, DIVISION ARTILLERY
TIKRIT, IRAQ

DATE:

B6-4/b7c-4





I, , understand that the results of this investigation are releasable under the Privacy Act of 1974 and the Freedom of Information Act. This means that individuals can, upon completing a proper information request, receive a copy of the formal findings of this investigation

Signature

Name:

Rank:

Unit:

 B6-4/b7c-4




MEDICAL RECORD

AUTHORIZED FOR LOCAL REPRODUCTION

CHRONOLOGICAL RECORD OF MEDICAL CARE

SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)

DATE

05/45
21 July 63

BP:

Patient seen and examined @ 0545.
S: Pt noted to be motionless on his back & signs of resp. Non responsive to verbal stimuli.

PULSE:

97.7-TEMP:

RESP:

ALL:

O: No pulse noted. No pupillary reaction or response. No respirations or breath sounds on auscultation. No heart rate (OS, OSA) and no abdominal signs or sounds noted. No muscle tone noted. Pt. cool to the touch & slight cyanosis in his lips & tips of digits.

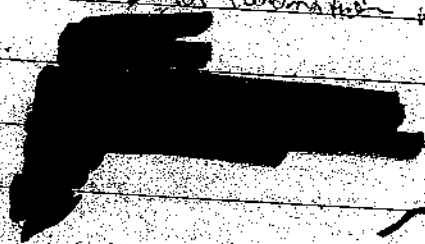
MEDS:

A. Pt. no longer living. Time of death noted to be 0545.

PMHx

P. Release to PNO for coordination with GI for removal of the cords.

PSHx



B6-2/b7c-2

TOB

ETOH

HOSPITAL OR MEDICAL FACILITY

SPONSOR'S NAME

STATUS

DEPART./SERVICE

RECORDS MAINTAINED AT

SSN/ID NO.

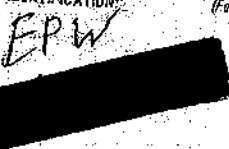
RELATIONSHIP TO SPONSOR

PATIENT'S IDENTIFICATION

(For typed or written entries, give: Name - last, first, middle; ID No. or SSN; Sex; Date of Birth; Rank/Grade)

REGISTER NO.

WARD NO.



B6-4/b7c-4

CHRONOLOGICAL RECORD OF MEDICAL CARE

Medical Record

STANDARD FORM 600

(REV. 6-97)

Prescribed by GSA/ICMR
FIRM (41 CFR) 201-9.202-1

USAFA V2.00

6207



Hx thru translator

MEDIC. CORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)

2 July 83

60 40 ♂ co chest pain (L side) x 4 months

BP: 140/93

R.T.S. Had operat from R thigh to chest per

PUL: 96

micro surgery x 4 months ago. -- Had surgery suggest

TEM: 98.5

of angiology; Pain described as burning sensation

RESP: 19

worse when undressed -- Not affected by heat

ALL: 0

in 7th physical exerting 4503 of No-sea f

1-D. 96/100

Resting P 85 Radiation Neck pain -- This pain

MEI

has been constant over past 4 months No recent

deasbird

change in Tg Sx; Pt indicator (D) on chest

PMII

o- unmarked, int. is noted

1207 episode

YR

Lungs - clear

PSI: 5 wate

Chest - traumatic appearance; @ 7TB in sub

TO:

area; throat - RRR 5 (M)

ETC:

Abd - benign of epigastric TTB

P/F Hx

A - Chest pain doubt cardiac etiology not urgent as

no change in Sx over 4 months not worse on exertion

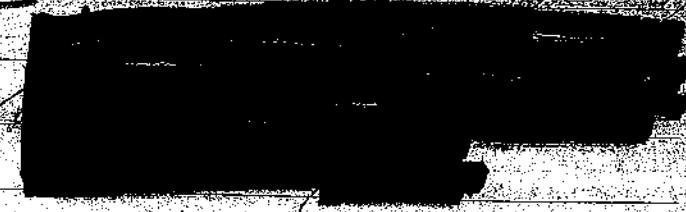
Pt's vital signs are well

To 2nd CSU in an Rx (see lab report)

Cardiologist

B6-4

b7c-4



ASPIRAL I	FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
PONSOR		SSN/ID NO.	RELATIONSHIP TO SPONSOR	
PATIENT'S II	RESIDENCE:	<small>(For typed or written entries, give: Name - last, first, middle; ID No. or SSN; Sex; Date of Birth; Rank/Grade)</small>		REGISTER NO.
				WARD NO.



B6-4

b7c-4

24



MEDICAL RECORD	EMERGENCY CARE AND TREATMENT (Doctor)	TIME SEEN BY PROVIDER
----------------	--	-----------------------

TEST RESULTS										
CBC	WBC	SMAC	ABG/PULSE OX					RADIOLOGY	Check if read by radiologist <input type="checkbox"/>	
	H/H		SUP O2	PH	PO2	RESULTS				
	PLT		PCO2	SAT	OTHER					
PT	EKG INTERPRETATION									
APTT	BHCG	ETOH	GLU	U/A	DIP	MICRO				

PROVIDER HISTORY/PHYSICAL

yo Acute male % chest pain - CONTINUOUS -

60 yo male EPW @ recent w/ CP off approx 12 hrs.
No CP currently while @ rest. @ SOB @ diaphoretic.

5' AAO, MAD, dry mucous membranes

Lungs - CRRB Heart - RRR 5 @

Edema @ edema

① Still crying off med

135 / 43 | 127/6
1.1

CXR - MAD

EKG - Qv V1+V2
ST Δ V5-V6

@ code Δ

ECG med per cords
hydration @ JVP @ yo
Card consult

flr 1-2 wk

PMH:
Diabetes
Hyp HTN
PSHX: ? Grade
CAB

CONSULT WITH	TIME	ACTION

RESIDENT/STUDENT SIGNATURE AND STAMP

PROVIDER SIGNATURE AND STAMP

DIAGNOSIS:

as above

[Redacted Signature]
B6-4/1
b7c-4

PATIENT IDENTIFICATION (Typed or written entries: Give Name - last, first, middle; ID No. (SSN or other); hospital or medical facility)

EPW *[Redacted]* B6-4/
b7c-4

EMERGENCY CARE AND TREATMENT (Doctor)
Medical Record

STANDARD FORM 558 (REV. 9-96)
Prescribed by GSA/CMR
FPMR (41 CFR) 101-11.203(b)(10)
USARA V1.00

b7c-4

Ward/Section: EMT REQUESTING PHYSICIAN: [REDACTED] BG-4 LABORATORY RESULT FORM
 (Subject to the Privacy Act of 1974)
 LAST, FIRST, MI. EPW [REDACTED] BG-4 DATE 3 July TIME 1300 SSN/PSEUDO-SSN: [REDACTED] BG-4

Hematology/CBC			Urinalysis			Misc. Serology		
TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE
WBC		4.8-10.8 x 10 ³	Color		N/A	RPR		Negative
RBC		4.7-6.1 x 10 ⁶	App		N/A	Mono		Negative
Hgb		14-18 g/dl (M) 12-16 g/dl (F)	Glu		Negative	Microbiology		
Hct		42-52% (M) 37-47% (F)	Bili		Negative			
MCV		80-94 fl (M) 81-99 fl (F)	Ket		Negative	Source		
Plt		130-500 x 10 ³ verified	SG		N/A	Gram Stain		
Lymph %		20.5-51.1%	Bld		Negative	Occ Bld		Negative
Segs			pH		N/A	H. pylori		Negative
			Mono			Prot		Negative
Bands			Urob		0.2-1.0	Malaria		
			Eos			Leuk		Negative
Lymph			Nit		Negative	Other		
			Baso			HCG		Negative
Alyp								
			RBC Morph					
Span Hematocrit						CSF		
Sed Rate			Cell Count			MUST SUBMIT SETS WITH LABRY UNIT REQUESTED		
Olig			Directigen			ABO/Rh		
Coagulation Studies			Blood Transfusion Crossmatch			MUST SUBMIT SETS WITH LABRY UNIT REQUESTED		
TEST	RESULT	REF. RANGE	UNIT	TYPE	CROSSMATCH			
PT		9.8-13.6 secs						
APTT		21-34 secs						
D dimer		<20 ug/ml						
FDP		<10 ug/ml						

REMARKS:
 REPORTED BY: _____ DATE: _____ LAB ID NO.: _____

6270

TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE	TEST	RESULT	REF. RANGE
Na		138-146 mmol/L	ALB		3.5-5.5 g/dl	GLU		73-118 mg/dl
K		3.5-4.9 mmol/L	ALP		26-84 u/l	BUN		7-22 mg/dl
Cl		98-109 mmol/L	ALT		10-47 u/l	CA ⁺⁺		8.0-10.3 mg/dl
pH		7.31-7.45	AMY		14-97 u/l	CRE		0.6-1.2 mg/dl
PCO ₂		35-45 mmHg (art) 41-51 mmHg (ven)	AST		11-38 u/l	NA ⁺		128-145 mmol/l
PO ₂		80-105 mmHg (art) N/A (ven)	TBIL		0.2-1.6 mg/dl	K ⁺		3.5-4.7 mmol/L
TCO ₂		23-27 mmol/L (art) 24-29 mmol/L (ven)	BUN		7-22 mg/dl	CL ⁻		98-108 mmol/l
HCO ₃		22-26 mmol/L (art) 23-28 mmol/L (ven)	CA ⁺⁺		8.0-10.3 mg/dl	TCO ₂		18-31 mmol/l
sO ₂		95-98%	CHOL		100-200 mg/dl	TEST RESULT REF. RANGE		
BE _{eff}		(-2) - (+3) mmol/L	CRE		0.6-1.2 mg/dl			
AnGap		10-20 mmol/L	GLU		73-118 mg/dl	ALB		3.5-5.5 g/dl
Ca		1.12-1.32 mmol/L	IP		5-8 g/dl	ALP		26-84 u/l
BUN		5-26 mg/dl	TEST RESULT REF. RANGE			ALT		10-47 u/l
GLU		70-105 mg/dl				AMY		14-97 u/l
Creat		0.7-1.5 mg/dl	GLU	276	73-118 mg/dl	AST		11-38 u/l
Hb		38-51% PCV	BUN	28	7-22 mg/dl	TBIL		0.2-1.6 mg/dl
Hct		12-17 g/dl	CRE	11	0.6-1.2 mg/dl	TCO ₂		18-31 mmol/l
TEST RESULT REF. RANGE			CR	60	49-80 (M) 40-120 (F)	IP		5-8 g/dl
			NA ⁺	135	128-145 mmol/l	TEST RESULT REF. RANGE		
TEST RESULT REF. RANGE			K ⁺	4.3	3.5-4.7 mmol/L			
			TEST RESULT REF. RANGE			CL ⁻	98	98-108 mmol/l
TEST RESULT REF. RANGE						TCO ₂	22	18-31 mmol/l
			TEST RESULT REF. RANGE					
TEST RESULT REF. RANGE								

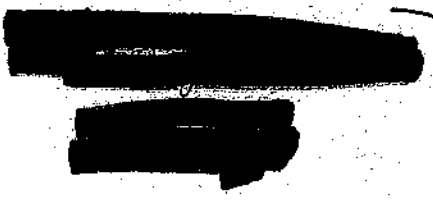
No TCO₂ dx

REMARKS:

REPORTED BY: _____ DATE: _____ LAB ID NO.: _____

MEDICAL RECORD		EMERGENCY CARE AND TREATMENT (Patient)			LOG NUMBER	TREATMENT FACILITY	
PATIENT'S HOME ADDRESS OR DUTY STATION					RECORDS MAINTAINED AT		
STREET ADDRESS					ARRIVAL		
CITY					DATE (Day, Month, Year)	TIME	
					354103	1235	
					TRANSPORTATION TO FACILITY		
SEX	DUTY/LOCAL PHONE		MILITARY STATUS			THIRD PARTY INSURANCE	
M	AREA CODE	NUMBER	ITEM	YES	NO	N/A	ITEM
AGE	HOME PHONE		PRP				ADDITIONAL INSURANCE
60	AREA CODE	NUMBER	FLYING STATUS				DD 2568 IN CHART
CURRENT MEDICATIONS			INJURY OR OCCUPATIONAL ILLNESS			EMERGENCY ROOM VISIT	
LATE AM 24 pills			translator			DATE LAST VISIT	
			IS THIS AN INJURY?			24 HOUR RETURN	
			INJURY/SAFETY FORMS			TETANUS	
ALLERGIES			HOW			DATE LAST SHOT	
NKDA						COMPLETED INITIAL SERIES	
CHIEF COMPLAINT						YES NO	
Engine on D side x 4 hrs @ 1419						YES NO	
CATEGORY OF TREATMENT		TIME		VITAL SIGNS			
<input checked="" type="checkbox"/> EMERGENT		1230		TIME	1230	1419	1450
<input type="checkbox"/> URGENT				BP	150/60	139/67	125/65
<input type="checkbox"/> NON-URGENT				PULSE	97	90	95
				RESP	15	10	10
				TEMP	99		99
				WT	76 kg		
LABORATORY	<input checked="" type="checkbox"/> CBC/DIFF	ABG	ET/PT	BLOOD URINE/BLOOD/QUANT		CXR PA & LAT/PORTABLE	
	<input type="checkbox"/> URINE CX	UA/MSC/CATH		CHEM		ACUTE ABDOMEN	
	<input type="checkbox"/> BLOOD C/S X					C-SPINE	
	<input checked="" type="checkbox"/> Sputum					IS-SPINE	
ORDERS				MONITOR			
TIME	ORDERS	BY	COMPLETED BY	TIME	PATIENT'S RESPONSE		
10:00	1000	gt					
10:00	1000	gt					
DISPOSITION		DISPOSITION QUARTERS / OFF DUTY		PATIENT/DISCHARGE INSTRUCTIONS			
<input type="checkbox"/> HOME <input type="checkbox"/> FULL DUTY		<input type="checkbox"/> 24 HRS <input type="checkbox"/> 48 HRS <input type="checkbox"/> 72 HRS		I have received and understand these instructions.			
MODIFIED DUTY UNTIL		RETURN TO DUTY		PATIENT'S SIGNATURE			
CONDITION UPON RELEASE		ADMIT TO UNIT/SERVICE		REFERRED TO WHEN			
<input type="checkbox"/> IMPROVED <input type="checkbox"/> UNCHANGED							
<input type="checkbox"/> DETERIORATED							
PATIENT'S IDENTIFICATION		(Fac typed or written entries, give: Name - last, first, middle; ID no. (SSN or other); hospital or medical facility)					

0024



B6-4/
b7c-4

EMERGENCY CARE AND TREATMENT (Patient)
Medical Record

STANDARD FORM 558 (REV. 9-96)
Prescribed by GSA/ICMR
FPMR 41 CFR 101-11.203(b)(10)
USAPA V1.00

6272

MEDICAL RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
03 JUL 03 1330	<p><i>Cardiology Hx via interp.</i></p> <p>60 YM sent for evaluation of angina. Has known H/O ASCAD (unknown anatomy but had cath & intervention 3 mos ago in Baghdad) and has SSCP for few days since stopping meds. Daily episodes - especially in mornings. Prior to that - sx's were controlled.</p> <p>No current pain.</p> <p>Meds: ASA, ACET, SL-NTG - 2 others not known</p> <p>PMH: ASCAD, DMII</p> <p>S/Hx: In custody ~ 10 days.</p> <p>of 150/80, 94, 16, 95% RA - appears well</p> <p>lungs w/ very mild wheezes at base, NL CVR, NL S/S, SS soft abd, g abdomen</p> <p>EKG: NSR, Septal MI - a.u. No ST-T NO prior</p> <p>CX 60, CXR - acute pulmonary edema 28/11</p> <p>Echo: poor quality - LV fun grossly NL - cannot R/O RWMA</p> <p>Imp: 1) ASCAD - angina based on being off meds. No MI by Hx/EKG.</p> <p>- Restart meds: ASA 325 qd, aspirin 25 mg qd, lisinopril 20 mg qd</p> <p>SL NTG prn, glipizide 5 mg po qd</p> <p>- Flu in T wk if sx's not improved.</p>

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

bb-4
b7c-4

6273

opv

B6-4

ID

B6-4

3-May-1997

4:03:13

28th COMBAT SUPPORT HOSPITAL

60 years
Male

Asian
160 lbs

Vent. rate	91 bpm
PR interval	160 ms
QRS duration	96 ms
QT/QTc	348/428 ms
P-R-T axes	73 -17 71

Normal sinus rhythm
 Segual infarct age undetermined
 Abnormal ECG

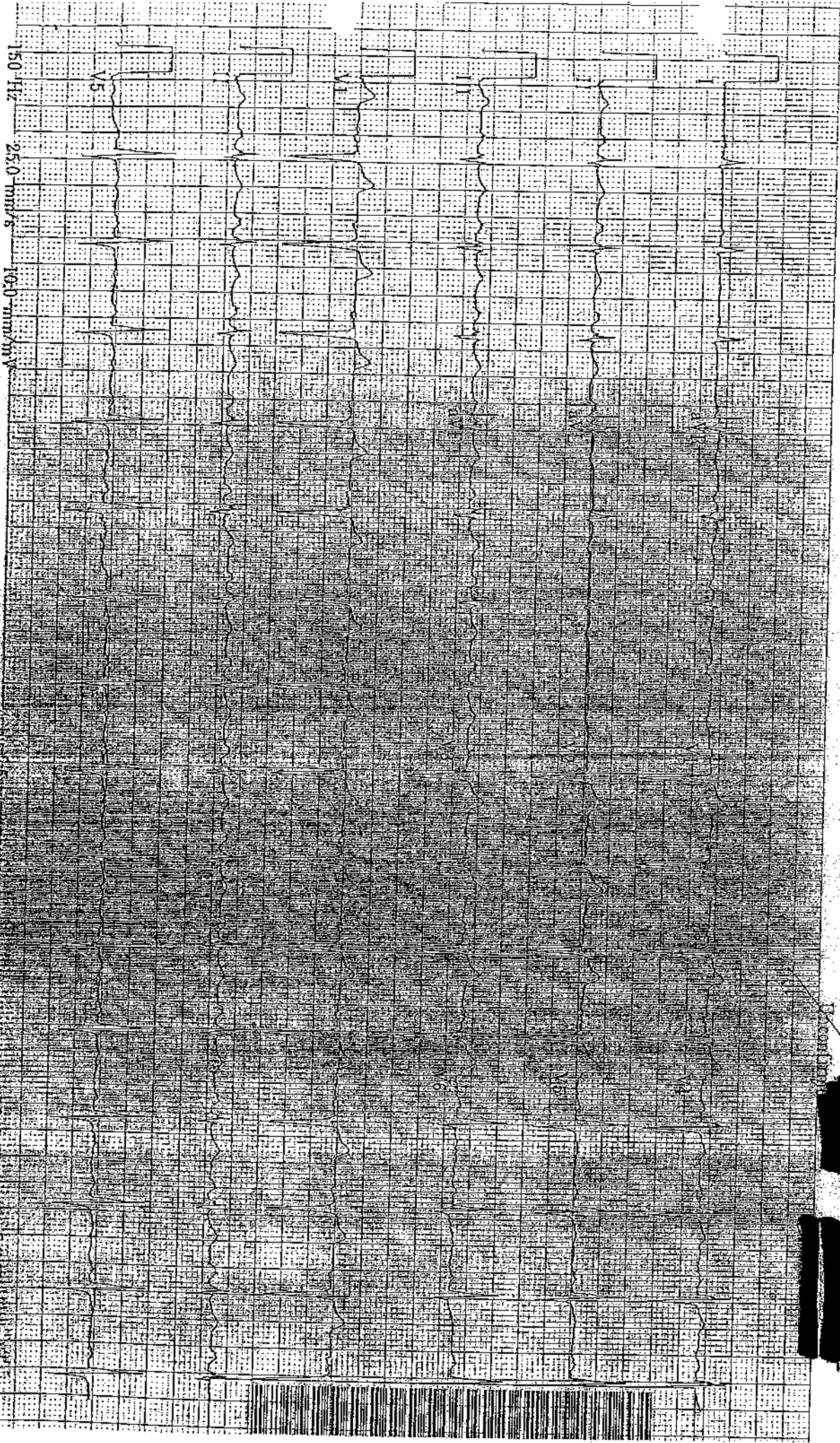
NSST-T

Technician: lt smith
Test ind: chest pain

Meds: ?

No prior.

██████████
 → B6-4/107c4
 6274



b6-4, b7c-4

RADIOLOGIC CONSULTATION REQUEST/REPORT

(Radiology/Nuclear Medicine/Ultrasound/Computed Tomography Examinations)

EXAMINATION(S) REQUESTED

CXR

AGE/SEX 60/M	SSN (Sponsor) EPW [REDACTED]	WARD/CLINIC ACC	REGISTER NO.
FILM NO.			PREGNANT <input type="checkbox"/> YES <input type="checkbox"/> NO
REQUESTED BY (Print) Referral from Palace			TELEPHONE/PAGE NO.
SIGNATURE OF REQUESTOR			DATE REQUESTED 3 July 83

SPECIFIC REASON(S) FOR REQUEST (Complaints and findings)

Chest pain

DATE OF EXAMINATION (Month, day, year) 7/3/83	DATE OF REPORT (Month, day, year)	DATE OF TRANSCRIPTION (Month, day, year)
--	-----------------------------------	--

RADIOLOGIC REPORT

PATIENT'S IDENTIFICATION (For typed or written entries give: name - last, first, middle, Medical Facility)

EPW [REDACTED] B6-4
b7c-4

LOCATION OF MEDICAL RECORDS
LOCATION OF RADIOLOGIC FACILITY
SIGNATURE

STATEMENT OF PRISONER # [REDACTED]
23 JULY 2003

b6-4
b7c-4

This interview was conducted with the use of an interpreter.

Prisoner [REDACTED] was interviewed regarding circumstances surrounding the death of prisoner [REDACTED]

The two prisoners slept next to each other, prisoner [REDACTED] stated that he had been "taking care" of [REDACTED] for the past 25 days since they were both moved up to the Division Detainee Collection Point (DCCP) from Diyala province. Prisoner [REDACTED] stated that [REDACTED] had told him that he was diagnosed approximately 4 years ago with "6 arteries blocked in his heart". [REDACTED] further stated that he had a procedure done in Baghdad last year to open some of the arteries and was to have another procedure performed in April of this year.

Prisoner [REDACTED] stated that when [REDACTED] was originally processed into the DCCP he was able to walk on his own and perform most daily living functions. [REDACTED] stated that [REDACTED] had complained of chest pains in the past and was taken by the medics to a hospital (he stated that it was the Tikrit Hospital, however it was really the 28th CSH). [REDACTED] stated that he had received some medicines from the hospital but did not have any return visits.

[REDACTED] stated that in the last 3-4 days [REDACTED] was feeling worse, was unable to eat because of abdominal pain, nausea and vomiting. [REDACTED] also complained of chest pain for the last couple of days, he was unsure if he had told the MP [REDACTED] of his chest pain.

The night before his death, unknown time, [REDACTED] stated that [REDACTED] had expressed a "feeling like he was going to die". [REDACTED] stated that he had informed the medics of [REDACTED] complaints and the medics gave him an aspirin. [REDACTED] stated that he requested the medication "placed under his tongue" (presumably nitroglycerin) but was told by the medics that they did not have any. At approximately 0500 [REDACTED] was helped to the restroom by some of the other detainees and was complaining of abdominal pain. [REDACTED] apparently collapsed after being assisted from the latrine and was carried back to his tent. [REDACTED] stated that he immediately informed the MP's and they responded with medical personnel.

b7c-4

b6-4
b7c-4

6270

DETAINEE DISPOSITION WORKSHEET

MP#: [REDACTED]

DETAINEE NAME: [REDACTED]

CONFINEMENT DATE: 27 JUNE 2003

b6-4
b7c-4

STAFF RECOMMENDATION: 23

G2 [REDACTED] B6-4

G3 [REDACTED] B6-4 *intensity*

PMO [REDACTED] B6-4

SIA [REDACTED] B6-4 / B5-3

b7c-4

 RELEASE DETAIN TRANSPORT TO CHA

COMMENTS: _____

[REDACTED]

B6-4
b7c-4

INCIDENT REPORT FORM

Type of Report: Initial

Date/time of report: 22 0815 JUL 03

Date/time of incident: 22 0515 JUL 03

Location of incident: LD 80132903 (TF IH CCP-Tikrit Main Palace)

Unit involved in the incident: 5th Platoon, 4th Military Police Company

Name of senior person involved in incident and contact information: [REDACTED]

Narrative of Incident: Enemy Prisoner of War Detainee [REDACTED] 60 year old local national had been detained in the TFCCP since 27 June, 2003. Individual was detained for possession of numerous weapons and a large quantity of ammunition. The detainee was seen by 4th MP Company medics approximately 3 times for health issues such as dehydration, his refusal to eat on numerous occasions, however there was no indication of any serious illness or injuries due to his stable vital signs during each checkup by 4th MP Medics. The individual was on multiple unknown medications upon his arrival to the TFCCP. At approximately 0400 the detainee was assisted by two other detainees ([REDACTED] and [REDACTED]) to utilize the latrine due to stomach pain. The detainee completed utilizing the latrine and was carried back to the detainee tent by the two detainees. Approximately 0500 the two detainees ([REDACTED] and [REDACTED]) sought the nearest Military Policemen and stated to the 2 MP's ([REDACTED] and [REDACTED]) that the detainee was dead. The [REDACTED] of the outer portion of the camp ([REDACTED]) was notified, and he ordered [REDACTED] to go summon a medic from 4th MP HQ. [REDACTED] went into the cage and was informed by [REDACTED] and [REDACTED] he had a low pulse. [REDACTED] checked for responsiveness and pulse and did not detect response or pulse. [REDACTED] 4th MP Company arrived on scene and verified that there was no pulse or signs of life, and [REDACTED] a Doctor at the Tikrit Main Palace TMC arrived and pronounced the detainee dead at 0540 hours.

Friendly Casualties: N/A

Enemy Casualties: N/A

EPWs: Deceased of unknown causes

What are the unit's future actions:

POC name and contact information: [REDACTED]
Company at DNVT [REDACTED]

} B6-4
b7c-4

- Arson (I.P.C. 342)
- Solicitation of Fornication/Prostitution (I.P.C. 399)
- Rape/Indecent/Sexual Assaults/Acts (I.P.C. 393-98, 402)
- Murder (I.P.C. 405)
- Aggravated Assault/Assault With Intent To Kill (I.P.C. 410)
- Maiming (I.P.C. 412)
- Simple Assault (I.P.C. 415)
- Kidnapping (I.P.C. 421)
- Burglary or Housebreaking (I.P.C. 428)
- Extortion/Communicating Threats (I.P.C. 430)
- Theft (I.P.C. 439)
- Destruction of Property (I.P.C. 477)
- Obstructing a Public Highway/Place (I.P.C. 487)
- Discharging Firearm/Explosive in City/Town/Village (I.P.C. 495)
- Riot or Breach of Peace (I.P.C. 495(3))
- Other

Offense against Coalition Forces [check one] if "Other" then describe: Area Tru-Banking

Violation of Curfew

Illegal Possession of Weapon

Assault/Attack on Coalition Forces

Theft of Coalition Force Property

Trespass on Military Installation or Facility

Photographing/Surveillance of Military Installation or Facility

Obstructing Performance of Military Mission

Other

Apprehending Unit: SF8 En Bu Location Grid: M 672 439 73

Date of Incident (D/M/Y): 23/06/03 Time of Incident: 0210 hrs to 0215 hrs Date of Report (D/M/Y): 1/1 Time of Report: 1 hrs

36-4

Detainee #				Key Connected Person			
Last Name				Victim		Witness	
First Name				Last Name		First Name	
Hair Color		Scars/Tattoos/Deformities		Hair Color		Scars/Tattoos/Deformities	
Eye Color		Weight lb		Height in		Eye Color	
Address				Address			
Place of Birth				Place of Birth			
Ethnicity/Religion		Sex		Phone #		DOB D/M/Y	
Sect		<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Mobile <input type="checkbox"/> Regular		<input type="checkbox"/> Mobile <input type="checkbox"/> Regular	
<input type="checkbox"/> Passport		<input type="checkbox"/> Dr. license		<input type="checkbox"/> Other (specify)		<input type="checkbox"/> Passport	
Document #				Document #			

670-4

Total Number of Persons Involved: 1 (list names/identifying info on reverse under "Additional Harm Information")

Vehicle Information

Make	Color	Vehicle Number	of	Vehicle(s)	Owner
Model	Type	VIN			
Year	State No.	Names of People in Vehicle		Number of People in Vehicle	

Contraband/Weapons in Vehicle

Property/Contraband Weapon

Photo Taken of Suspect with Weapon/Contraband: Yes/No

Type: _____ Serial No.: _____ Quantity: _____ Make: _____ Color/Caliber: _____

Other Details: _____ Where Found: _____ Receipt Provided to Owner: Yes/No

Name of Assisting Interpreter: _____ Email: _____ Phone/Contact Info: _____

Detaining Soldier's Name (Print): _____

Supervising Officer's Name (Print): _____

Signature: _____ Signature: _____

Email: _____ Email: _____

Unit Phone: _____ Unit Phone: _____

Date: 06/23/03 Date: 06/23/03

COALITION PROVISIONAL AUTHORITY FORCES APPREHENSION FORM

Why was this person detained? He was functioning as a middle man
in an arms trafficking ring

Who witnessed this person being detained or the reason for detention? Give names, contact numbers, addresses
B/5588

How was this person traveling (car, bus, on foot)?

Who was with this person?

What weapons was this person carrying? 2x 9mm boxes (empty), 1x Glock
AK mag, Tek 9 mag, 762 Hornet x 200, 7mm case, 1x Glock
Magazines

What contraband was this person carrying?

What other weapons were seized?

What other information did you get from this person?

Additional Helpful Information:



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

REPLY TO
ATTENTION OF:

AFYB-JA-AL

07 September 2003

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

SUBJECT: AR 15-6 Investigation – Legal Review

1. In accordance with AR 15-6, paragraph 2-3, I have reviewed the AR 15-6 investigation into the 13 August 03 death of a detainee at Camp Warhorse. I make the following determinations:
 - a. The proceedings comply with the legal requirements.
 - b. Errors in the proceedings, if any, do not have a material adverse effect on any individual's substantial rights.
 - c. Sufficient evidence supports the findings.
 - d. The recommendations are consistent with the findings.
2. The investigation is legally sufficient.
3. The point of contact is the undersigned at (DNVT) 534 [REDACTED]

b6-2

b6-2

b7C-2

[REDACTED]
CPT, JA
Administrative Law Attorney

INDEX OF ENCLOSURES AND EXHIBITS

ENCLOSURES:

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

b6-4/5
b7c-4/5

EXHIBITS:

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

b6-4/5
b7c-4/5

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

AECZ-FC-C

24 August 2003

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

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

1. FINDINGS

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

b6-2/7c-2

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

b6-2/7c-2

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

b6-1/7c-1

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

b6-2/7c-2

b6-4

b7c-4

6284

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

b(6)-4
b7c-4

b6-4/b7c-4

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

b6-1
b7c-1

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

b6-2
b7c-2

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

b6-1
b7c-1

b6-2
b7c-2

b6-4
b7c-4

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

AFZC-FC-C

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

b6-4
b7c-4

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

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

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

2. RECOMMENDATIONS

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

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

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

b6-4
b7c-4

AFZC-FC-C

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

b6-4
b7c-4

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

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

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

[REDACTED]

MAJ, MC
BN Surgeon, 64 FSB

REPORT OF PROCEEDINGS BY INVESTIGATING OFFICER/BOARD OF OFFICERS

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

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

SECTION I - APPOINTMENT

Appointed by

[REDACTED]

(b)(6)-2

(Appointing authority)

on 15 August 2003
(Date)

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

SECTION II - SESSIONS

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

at 1000 hours
(Time)

on 16 August 2003
(Date)

(If a formal board met for more than one session, check here . Indicate in an inclosure the time each session began and ended, the place, persons present and absent, and explanation of absences, if any.) The following persons (members, respondents, counsel) were present: (After each name, indicate capacity, e.g., President, Recorder, Member, Legal Advisor.)

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

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

1330 hours
(Time)

on

16 August 2003
(Date)

and completed findings and recommendations at

1800 hours
(Time)

on

24 August 2003
(Date)

SECTION III - CHECKLIST FOR PROCEEDINGS

A. COMPLETE IN ALL CASES

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

FOOTNOTES: ^{1/} Explain all negative answers on an attached sheet.

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

6203

Exhibits (para 3-16, AR 15-6)

- a. Are all items offered (whether or not received) or considered as evidence individually numbered or lettered as exhibits and attached to this report? YES NO
- b. Is an index of all exhibits offered to or considered by investigating officer or board attached before the first exhibit? X
- c. Has the testimony/statement of each witness been recorded verbatim or been reduced to written form and attached as an exhibit? X
- d. Are copies, descriptions, or depictions (if substituted for real or documentary evidence) properly authenticated and is the location of the original evidence indicated?
- e. Are descriptions or diagrams included of locations visited by the investigating officer or board (para 3-6b, AR 15-6)?
- f. Is each written stipulation attached as an exhibit and is each oral stipulation either reduced to writing and made an exhibit or recorded in a verbatim record?
- g. If official notice of any matter was taken over the objection of a respondent or counsel, is a statement of the matter of which official notice was taken attached as an exhibit (para 3-16d, AR 15-6)?

3 Was a quorum present when the board voted on findings and recommendations (paras 4-1 and 5-2b, AR 15-6)?

B. COMPLETE ONLY FOR FORMAL BOARD PROCEEDINGS (Chapter 5, AR 15-6)

- 4 At the initial session, did the recorder read, or determine that all participants had read, the letter of appointment (para 5-3b, AR 15-6)?
- 5 Was a quorum present at every session of the board (para 5-2b, AR 15-6)?
- 6 Was each absence of any member properly excused (para 5-2a, AR 15-6)?
- 7 Were members, witnesses, reporter, and interpreter sworn, if required (para 3-1, AR 15-6)?
- 8 If any members who voted on findings or recommendations were not present when the board received some evidence, does the inclosure describe how they familiarized themselves with that evidence (para 5-2d, AR 15-6)?

C. COMPLETE ONLY IF RESPONDENT WAS DESIGNATED (Section II, Chapter 5, AR 15-6)

- 9 Notice to respondents (para 5-5, AR 15-6):
 - a. Is the method and date of delivery to the respondent indicated on each letter of notification?
 - b. Was the date of delivery at least five working days prior to the first session of the board?
 - c. Does each letter of notification indicate —
 - (1) the date, hour, and place of the first session of the board concerning that respondent?
 - (2) the matter to be investigated, including specific allegations against the respondent, if any?
 - (3) the respondent's rights with regard to counsel?
 - (4) the name and address of each witness expected to be called by the recorder?
 - (5) the respondent's rights to be present, present evidence, and call witnesses?
 - d. Was the respondent provided a copy of all unclassified documents in the case file?
 - e. If there were relevant classified materials, were the respondent and his counsel given access and an opportunity to examine them?

- 10 If any respondent was designated after the proceedings began (or otherwise was absent during part of the proceedings):
 - a. Was he properly notified (para 5-5, AR 15-6)?
 - b. Was record of proceedings and evidence received in his absence made available for examination by him and his counsel (para 5-4c, AR 15-6)?

- 11 Counsel (para 5-6, AR 15-6):
 - a. Was each respondent represented by counsel?
 - Name and business address of counsel:
 - (If counsel is a lawyer, check here)
 - b. Was respondent's counsel present at all open sessions of the board relating to that respondent?
 - c. If military counsel was requested but not made available, is a copy (or, if oral, a summary) of the request and the action taken on it included in the report (para 5-6b, AR 15-6)?

- 12 If the respondent challenged the legal advisor or any voting member for lack of impartiality (para 5-7, AR 15-6):
 - a. Was the challenge properly denied and by the appropriate officer?
 - b. Did each member successfully challenged cease to participate in the proceedings?

- 13 Was the respondent given an opportunity to (para 5-8a, AR 15-6):
 - a. Be present with his counsel at all open sessions of the board which deal with any matter which concerns that respondent?
 - b. Examine and object to the introduction of real and documentary evidence, including written statements?
 - c. Object to the testimony of witnesses and cross-examine witnesses other than his own?
 - d. Call witnesses and otherwise introduce evidence?
 - e. Testify as a witness?
 - f. Make or have his counsel make a final statement or argument (para 5-9, AR 15-6)?

- 14 If requested, did the recorder assist the respondent in obtaining evidence in possession of the Government and in arranging for the presence of witnesses (para 5-8b, AR 15-6)?

- 15 Are all of the respondent's requests and objections which were denied indicated in the report of proceedings or in an inclosure or exhibit to it (para 5-11, AR 15-6)?

FOOTNOTES: 1) Explain all negative answers on an attached sheet.

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

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

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

(SEE ATTACHED MEMO)

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

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

(SEE ATTACHED MEMO)

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

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

(Recorder)

SEE ATTACHED FINDINGS + RECOMMENDATION MEMORANDUM

Investigating Officer (President)

(Member)

(Member)

(Member)

(Member)

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

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

(Member)

(Member)

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

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

RECEIVED

SEP 1990

RAYMOND T. ODIERNO
Major General, USA
Commanding

6291

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

AFCZ-FC-JA

5 September 2003

MEMORANDUM FOR RECORD

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

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

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

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

b6-2
b7c-2

6292



DEPARTMENT OF THE ARMY
HEADQUARTERS TASK FORCE IRONHORSE
TIKRIT, IRAQ

REPLY TO
ATTENTION OF

AFYB-CG

15 August 2003

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

SUBJECT: Appointment as a 15-6 Investigating Officer

1. You are hereby appointed an investigating officer pursuant to AR 15-6 and AR 210-7, paragraph 4-3, to conduct an informal investigation into the shooting death of a detainee on 13 July 2003. Additionally, you are to identify any systemic problems that the command can address and correct, if necessary.
2. You will use informal procedures under AR 15-6, Chapter 4. You will make specific findings and recommendations on all relevant issues you identify in the course of your investigation. If, during your investigation, you suspect that persons you intend to interview may have violated any provision of the Uniform Code of Military Justice (UCMJ) or any other criminal law, you must advise them of their rights under the UCMJ, Article 31, or the Fifth Amendment, as appropriate. Rights warnings and waivers will be documented on DA Form 3881. Provide each witness a Privacy Act statement before you solicit any personal information. All witness statements will be sworn and recorded on DA Form 2823.
3. Before proceeding with the investigation, contact [REDACTED] at 534-[REDACTED] for an initial legal briefing. [REDACTED] will serve as your primary legal advisor.
4. Your report, together with all evidence marked as exhibits, will be submitted to me in memorandum format no later than ten days from the date you receive this memorandum. Submit any requests for delay to me either orally or in writing. You will obtain a written legal review prior to submitting the completed investigation.

b6-2

FOR THE COMMANDER:

[REDACTED SIGNATURE]

COL, GS
Chief of Staff

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

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

ENCLOSURE II

DATA REQUIRED BY THE PRIVACY ACT

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

1. LOCATION: Rob War horse
2. DATE: 16 Aug 03
3. TIME: 1332
5. NAME (Last, First, MI): [Redacted]
6. SSN: [Redacted]
7. GRADE/STATUS: [Redacted]
8. ORGANIZATION OR ADDRESS: [Redacted]

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army CCo 6th FSB 38CTAIN

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

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

5. COMMENTS (Continue on reverse side)

Section B. Waiver

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

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

Section C. Non-waiver

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

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

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

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

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

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

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

- or -

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

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

THE WAIVER

"Do you understand your rights?"

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

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

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

"Do you want a lawyer at this time?"

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

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

SPECIAL INSTRUCTIONS

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

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

PRIOR INCRIMINATING STATEMENTS:

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

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

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

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

COMMENTS (Continued)

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

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

ENCLOSURE III

DATA REQUIRED BY THE PRIVACY ACT

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

1. LOCATION <i>Fob Warhorse</i>	2. DATE <i>10 Aug 83</i>	3. TIME <i>1254</i>	4. FILE NO.
5. NAME (Last, First, MI) [REDACTED]	8. ORGANIZATION OR ADDRESS <i>4th MD Ft Hood TX</i>		
6. SSN [REDACTED]	7. GRADE/STATUS <i>PFC E3</i>		

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

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

- I do not have to answer any question or say anything.
 - Anything I say or do can be used as evidence against me in a criminal trial.
 - (For personnel subject to the UCMJ)* I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. This lawyer can be a civilian lawyer I arrange for at no expense to the Government or a military lawyer detailed for me at no expense to me, or both.
- or -
- (For civilians not subject to the UCMJ)* I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. I understand that this lawyer can be one that I arrange for at my own expense, or if I cannot afford a lawyer and want one, a lawyer will be appointed for me before any questioning begins.
- If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

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

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

Section C. Non-waiver

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

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

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

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

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

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

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

- or -

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

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

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

THE WAIVER

"Do you understand your rights?"

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

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

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

"Do you want a lawyer at this time?"

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

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

SPECIAL INSTRUCTIONS

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

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

PRIOR INCRIMINATING STATEMENTS:

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

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

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

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

COMMENTS (Continued)

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

ENCLOSURE

DATA REQUIRED BY THE PRIVACY ACT

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

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

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

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

- Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:
- I do not have to answer any question or say anything.
 - Anything I say or do can be used as evidence against me in a criminal trial.
 - For personnel subject to the UCMJ I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. This lawyer can be a civilian lawyer I arrange for at no expense to the Government or a military lawyer detailed for me at no expense to me, or both.

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

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

5. COMMENTS (Continue on reverse side)

Section B. Waiver

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

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

Section C. Non-waiver

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

2. SIGNATURE OF INTERVIEWEE

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

6293

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

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

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

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

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

- or -

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

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

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

THE WAIVER

"Do you understand your rights?"

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

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

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

"Do you want a lawyer at this time?"

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

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

SPECIAL INSTRUCTIONS

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

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

PRIOR INCRIMINATING STATEMENTS:

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

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

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

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

COMMENTS (Continued)

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

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

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

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

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

- or -

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

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

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

THE WAIVER

"Do you understand your rights?"

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

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

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

"Do you want a lawyer at this time?"

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

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

SPECIAL INSTRUCTIONS

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

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

PRIOR INCRIMINATING STATEMENTS:

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

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

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

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

COMMENTS (Continued)

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

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

ENCLOSURE I

DATA REQUIRED BY THE PRIVACY ACT

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

1. LOCATION: FOB Warhorse
2. DATE: 10 Aug 03
3. TIME: 1230
4. FILE NO.
5. NAME: [REDACTED]
6. SSN: [REDACTED]
7. GRADE/STATUS: [REDACTED]
8. ORGANIZATION OR ADDRESS: [REDACTED]

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C Co 64FSB SBCT 47A

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

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

5. COMMENTS (Continue on reverse side)

Section B. Waiver

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

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

Section C. Non-waiver

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

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

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

ENCLOSURE VI

DATA REQUIRED BY THE PRIVACY ACT

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

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

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

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

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

5. COMMENTS (Continue on reverse side)

Section B. Waiver

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

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

Section C. Non-waiver

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

2. SIGNATURE OF INTERVIEWEE

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

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

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

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

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

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

- or -

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

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

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

THE WAIVER

"Do you understand your rights?"

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

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

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

"Do you want a lawyer at this time?"

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

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

SPECIAL INSTRUCTIONS

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

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

PRIOR INCRIMINATING STATEMENTS:

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

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

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

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

COMMENTS (Continued)

6303

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

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

ENCLOSURE VI

DATA REQUIRED BY THE PRIVACY ACT

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

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

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army O. Co 64 SB 3 BCT AI
suspected/accused: interview regarding death of Iraqi detainee
Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

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

5. COMMENTS (Continue on reverse side)

Section B. Waiver

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

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

Section C. Non-waiver

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

2. SIGNATURE OF INTERVIEWEE

6304

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

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

WARNING - Inform the suspect/accused of:

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

RIGHTS - Advise the suspect/accused of his/her rights as follows:

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

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

- or -

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

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

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

THE WAIVER

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

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

"Do you want a lawyer at this time?"

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

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

SPECIAL INSTRUCTIONS

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

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

FOR INCRIMINATING STATEMENTS:

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

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

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

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

ADDITIONAL COMMENTS (Continued)

6305

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

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

ENCLOSURE

DATA REQUIRED BY THE PRIVACY ACT

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

1. LOCATION: FOB Warhorse
2. DATE: 10 Aug 03
3. TIME: 1108
4. FILE NO.
5. NAME (Last, First, MI)
6. SSN
7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army C Co 6 AF SB 2 BCT 4 ID

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

Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

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

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

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

5. COMMENTS (Continue on reverse side)

Section B. Waiver

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

WITNESSES (If available)
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR

Section C. Non-waiver

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

2. SIGNATURE OF INTERVIEWEE

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

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

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

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

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

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

- or -

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

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

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

THE WAIVER

"Do you understand your rights?"

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

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

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

"Do you want a lawyer at this time?"

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

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

SPECIAL INSTRUCTIONS

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

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

PRIOR INCRIMINATING STATEMENTS:

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

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

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

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

COMMENTS (Continued)

6307

RIGHTS WAIVER PROCEDURE/WAIVER CERTIFICATE

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

ENCLOSURE VIII

DATA REQUIRED BY THE PRIVACY ACT

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

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

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

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

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

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

5. COMMENTS (Continue on reverse side)

Section B. Waiver

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

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

Section C. Non-waiver

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

2. SIGNATURE OF INTERVIEWEE

6308

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

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

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

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

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

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

- or -

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

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

THE WAIVER

"Do you understand your rights?"

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

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

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

"Do you want a lawyer at this time?"

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

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

SPECIAL INSTRUCTIONS

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

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

PRIOR INCRIMINATING STATEMENTS:

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

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

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

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

COMMENTS (Continued)

6309

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

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

ENCLOSURE

DATA REQUIRED BY THE PRIVACY ACT

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

Form with fields: LOCATION (CAMP WARHORSE), DATE (16 AUG 03), TIME (1041), FILE NO., NAME (Last, First, MI), ORGANIZATION OR ADDRESS, SSN, GRADE/STATUS. Includes handwritten notations b6-4, b7C-4.

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

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

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

- or -

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

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

COMMENTS (Continue on reverse side)

Section B. Waiver

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

Form with fields: WITNESSES (if available), SIGNATURE OF INTERVIEWEE, SIGNATURE OF INVESTIGATOR, TYPED NAME OF INVESTIGATOR, ORGANIZATION OF INVESTIGATOR. Includes handwritten notations b6-4, b7C-4, b6-2, b7C-2.

Section C. Non-waiver

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

SIGNATURE OF INTERVIEWEE [Redacted]

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

6310

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

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

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

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

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

- or -

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

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

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

THE WAIVER

"Do you understand your rights?"

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

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

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

"Do you want a lawyer at this time?"

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

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

SPECIAL INSTRUCTIONS

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

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

PRIOR INCRIMINATING STATEMENTS:

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

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

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

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

COMMENTS (Continued)

6311

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

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

ENCLOSURE X

DATA REQUIRED BY THE PRIVACY ACT

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

1. LOCATION: FOB Warhorse, Iraq
2. DATE: 16 Aug 03
3. TIME: 1050
4. FILE NO.
5. NAME (Last, First, MI): [Redacted]
6. SSN: [Redacted]
7. GRADE/STATUS: [Redacted]
8. ORGANIZATION OR ADDRESS: [Redacted]

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

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

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

5. COMMENTS (Continue on reverse side)

Section B. Waiver

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

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

Section C. Non-waiver

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

2. SIGNATURE OF INTERVIEWEE

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