

AETV-BGS-G-51

SUBJECT: Request for Sworn Statements for EOF Incident of 1 January 2007

(b)(2)High

f. Provide a complete physical description of the civilian vehicle involved in the incident, including any damage sustained to the vehicle and what was found in the vehicle.

g. Provide a complete physical description of the individual engaged and killed during the EOF incident.

(b)(2)High

i. Provide information as to who distributed claims cards or conducted consequence management after the EOF incident. If no claims cards were distributed or consequence management conducted, explain why this decision was made by leaders on the ground.

j. Include any other facts that the investigating officer should be made aware of.

2. You are not to discuss your Sworn Statement with anyone except legal counsel or those officials that need to know to include the Investigating Officer, Company Commander, and Company Executive Officer (in the Commander's absence).

3. If you are not willing to write a Sworn Statement in regards to the EOF incident on 1 January 2007, your chain of command will advise you to contact 2-82d Trial Defense Services (TDS) immediately at SVOIP 242-6840 at Building 70 on Camp Taji.

4. POC for this memorandum is the undersigned Investigating Officer at (b)(3)(b)(6) 7540.

(b)(3)(b)(6)

CPT, IN
Investigating Officer

(b)(2)High

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(b)(3)(b)(6)

ENCL III

SWORN STATEMENT

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

PRIVACY ACT STATEMENT

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

1. LOCATION CAMP TAJI	2. DATE (YYYYMMDD) 2007/01/30	3. TIME 1527HRS	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME (b)(3)(b)(6)	6. SSN (b)(3)(b)(6)	7. GRADE/STATUS SFC	
8. ORGANIZATION OR ADDRESS A COMPANY, 1-26 IN (MECH)			

9. I, (b)(3)(b)(6), WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

1. HAVE YOU DONE ANYTHING THAT YOU THINK IS ILLEGAL IN SECTOR?
1A. NO

2. HAVE YOU WITNESSED ANY OF YOUR SOLDIERS DO ANYTHING ILLEGAL IN SECTOR?
2A. NO.

3. HAVE YOU EVER VIOLATED ROE, EOF, AND LOAC WHILE IN SECTOR.
3A. NO.

(b)(3)(b)(6)

(b)(3)(b)(6)

(b)(3)(b)(6)

(b)(3)(b)(6)

(b)(3)(b)(6)

Nonresponsive, (b)(2)High, (b)(3)(b)(6)

(b)(3)(b)(6)

(b)(3)(b)(6)
(b)(3)(b)(6)

(b)(3)(b)(6)

(b)(3)(b)(6)

(b)(3)(b)(6)

(b)(3)(b)(6)

(b)(3)(b)(6)

(b)(3)(b)(6)

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

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

STATEMENT OF (b)(3)(b)(6) TAKEN AT CAMP TAJI DATED 2007/01/30

9. STATEMENT *(Continued)*

b)(3)(b)(6)
c)(3)(b)(6)

d)(3)(b)(6)

Nonresponsive, (b)(3)(b)(6)

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 3 PAGES

PAGE:

(b)(2)High

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ENCL III

STATEMENT OF (b)(3)(b)(6) TAKEN AT CAMP TAJI DATED 2007/01/30

9. STATEMENT (Continued)

AFFIDAVIT

I, (b)(3)(b)(6), HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

(Signature of Person Making Statement)

WITNESSES:

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

(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

A CO 1-26 IN

CAMP TAJI

APO AE 09033

ORGANIZATION OR ADDRESS

CPT / (b)(3)(b)(6)
(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE 3 OF 3 PAGES

SWORN STATEMENT

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

PRIVACY ACT STATEMENT

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

1. LOCATION CAMP TAJI	2. DATE (YYYYMMDD) 2007/01/29	3. TIME 2139HRS	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME (b)(3)(b)(6)	6. SSN (b)(3)(b)(6)	7. GRADE/STATUS SSG	
8. ORGANIZATION OR ADDRESS A COMPANY, 1-26 IN (MECH)			

9. I, (b)(3)(b)(6), WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

1. HAVE YOU DONE ANYTHING THAT YOU THINK IS ILLEGAL IN SECTOR?
1A. NO SIR.

2. HAVE YOU WITNESSED ANY OF YOUR SOLDIERS DO ANYTHING ILLEGAL IN SECTOR?
2A. NO.

3. DO YOU UNDERSTAND THE RULES OF ENGAGEMENT, ESCALATION OF FORCE AND LAW OF ARMED CONFLICT THAT HAS BEEN BRIEFED TO YOU BY YOUR COMMANDER.
3A. YES SIR.

4. HAVE YOU EVER VIOLATED ROE, EOF, AND LOAC WHILE IN SECTOR.
4A. NO SIR.

not responsive, doesn't relate the EOF incident, (b)(3)(b)(6)

7. ON THE 1ST OF JANUARY DURING A FIRE FIGHT, DID YOU WITNESS LT (b)(3)(b)(6) ENGAGE A VEHICLE FROM APPROXIMATELY (2) Hig
7A. NO, I WAS ON TAJI WAITING TO GO ON R&R

not responsive, doesn't relate the EOF incident, (b)(3)(b)(6)

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

ENCL III

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

STATEMENT OF

(b)(3)(b)(6)

TAKEN AT CAMP TAJI

DATED 2007/01/29

not responsive, doesn't relate the EOF incident, (b)(3)(b)(6)

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 3 PAGES

PAGE 2

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APPROPRIATE
(b)(3)(b)(6)

ENIL III

9. STATEMENT (Continued)

AFFIDAVIT

I, (b)(3)(b)(6), HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

(Signature of Person Making Statement)

WITNESSES:

ORGANIZATION OR ADDRESS

A CO 1-26 IN
CAMP TAJI
APO AE 09033
ORGANIZATION OR ADDRESS

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

(Signature of Person Administering Oath)

CPT, (b)(3)(b)(6)
(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

ENCL III

SWORN STATEMENT

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

PRIVACY ACT STATEMENT

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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 CAMP TAJI	2. DATE (YYYYMMDD) 2007/01/30	3. TIME 1645HRS	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME (b)(3)(b)(6)	6. SSN (b)(3)(b)(6)	7. GRADE/STATUS SSG	

8. ORGANIZATION OR ADDRESS
A COMPANY, 1-26 IN (MECH)

9. I, (b)(3)(b)(6), WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

1. HAVE YOU DONE ANYTHING THAT YOU THINK IS ILLEGAL IN SECTOR?
1A. NO SIR.

2. HAVE YOU WITNESSED ANY OF YOUR SOLDIERS DO ANYTHING ILLEGAL IN SECTOR?
2A. NO SIR.

3. HAVE YOU EVER VIOLATED ROE, EOF, AND LOAC WHILE IN SECTOR.
3A. NO SIR.

not responsive, doesn't relate the EOF incident, (b)(3)(b)(6)

10. EXHIBIT D	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF 3 PAGES
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USE THIS PAGE IF NEEDED. IF THIS PAGE IS NOT NEEDED, PLEASE PROCEED TO FINAL PAGE OF THIS FORM.

STATEMENT OF (b)(3)(b)(6) _____ TAKEN AT CAMP TAJI DATED 2007/01/30

9. STATEMENT (Continued)

not responsive, doesn't relate the EOF incident, (b)(3)(b)(6)

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 3 PAGES

STATEMENT OF

(b)(3)(b)(6)

TAKEN AT CAMP TAJI

DATED 2007/01/30

9. STATEMENT (Continued)

AFFIDAVIT

I, (b)(3)(b)(6), HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

(Signature of Person Making Statement)

WITNESSES:

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

(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

A CO 1-26 IN

CAMP TAJI

APO AE 09033

ORGANIZATION OR ADDRESS

CPT, (b)(3)(b)(6)

(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE 3 OF 3 PAGES

SWORN STATEMENT

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

PRIVACY ACT STATEMENT

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

1. LOCATION OLD MOD	2. DATE (YYYYMMDD) 2007/03/02	3. TIME 1500HRS	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME (b)(3)(b)(6)	6. SSN (b)(3)(b)(6)	7. GRADE/STATUS SPC	

8. ORGANIZATION OR ADDRESS
A COMPANY, 1-26 IN (MECH)

9. I, (b)(3)(b)(6), WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

1. HAVE YOU DONE ANYTHING THAT YOU THINK IS ILLEGAL IN SECTOR?
1A. NO.
2. HAVE YOU WITNESSED ANY OF YOUR SOLDIERS DO ANYTHING ILLEGAL IN SECTOR?
2A. NO.
3. DO YOU UNDERSTAND THE RULES OF ENGAGEMENT, ESCALATION OF FORCE AND LAW OF ARMED CONFLICT THAT HAS BEEN BRIEFED TO YOU?
3A. YES.
4. HAVE YOU EVER VIOLATED ROE, EOF, AND LOAC WHILE IN SECTOR?
4A. NO.

not responsive, doesn't relate the EOF incident, (b)(3)(b)(6)

10. EXHIBIT G	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF 3 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF _____ TAKEN AT _____ DATED _____"
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USE THIS PAGE IF NEEDED. IF THIS PAGE IS NOT NEEDED, PLEASE PROCEED TO FINAL PAGE OF THIS FORM.

STATEMENT OF (b)(3)(b)(6) _____ TAKEN AT OLD MOD DATED 2007/03/02

9. STATEMENT (Continued)

not responsive, doesn't relate the EOF incident, (b)(3)(b)(6)

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 3 PAGES

PAGE 2 OF FORM 1000 OF 1000

(b)(2)High

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ENCL III

STATEMENT OF

(b)(3)(b)(6)

TAKEN AT OLD MOD

DATED 2007/03/02

9. STATEMENT (Continued)

AFFIDAVIT

I, (b)(3)(b)(6) _____, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

(Signature of Person Making Statement)

WITNESSES:

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

(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

A CO 1-26 IN

CAMP TAJI

APO AE 09033

ORGANIZATION OR ADDRESS

CPT (b)(3)(b)(6)

(Authority To Administer Oaths)

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE 3 OF 3 PAGES

PAGE 3, 01 FORM 1000 000 0000

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ENCL III

SWORN STATEMENT

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

PRIVACY ACT STATEMENT

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

1. LOCATION OLD MOD	2. DATE (YYYYMMDD) 2007/03/02	3. TIME 1530HRS	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME (b)(3)(b)(6)		6. SSN (b)(3)(b)(6)	7. GRADE/STATUS PFC
8. ORGANIZATION OR ADDRESS A COMPANY, 1-26 IN (MECH)			

9. I, (b)(3)(b)(6), WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

1. HAVE YOU DONE ANYTHING THAT YOU THINK IS ILLEGAL IN SECTOR?
1A. NO.

2. HAVE YOU WITNESSED ANY OF YOUR SOLDIERS DO ANYTHING ILLEGAL IN SECTOR?
2A. NO.

3. DO YOU UNDERSTAND THE RULES OF ENGAGEMENT, ESCALATION OF FORCE AND LAW OF ARMED CONFLICT THAT HAS BEEN BRIEFED TO YOU?
3A. ROGER, SIR.

4. HAVE YOU EVER VIOLATED ROE, EOF, AND LOAC WHILE IN SECTOR?
4A. NO SIR.

not responsive, doesn't relate the EOF incident, (b)(3)(b)(6)

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

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

STATEMENT OF

(b)(3)(b)(6)

TAKEN AT OLD MOD

DATED 2007/03/02

9. STATEMENT (Continued)

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 3 PAGES

PAGE 2 DA FORM 2822 DEC 1999

(b)(2)High

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STATEMENT OF (b)(3)(b)(6) TAKEN AT OLD MOD DATED 2007/03/02

9. STATEMENT (Continued)

AFFIDAVIT

I, (b)(3)(b)(6), HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 1. 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.

(Signature of Person Making Statement)

WITNESSES:

ORGANIZATION OR ADDRESS
A CO 1-26 IN
CAMP TAJI
APO AE 09033
ORGANIZATION OR ADDRESS

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

(Signature of Person Administering Oath)

CPT, (b)(3)(b)(6)
(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE 3 OF 3 PAGES

ENCLOSURE

SWORN STATEMENT

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

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).
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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 OLD MOD	2. DATE (YYYYMMDD) 2007/03/17	3. TIME 1730HRS	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME (b)(3)(b)(6)	6. SSN (b)(3)(b)(6)	7. GRADE/STATUS SGT	
8. ORGANIZATION OR ADDRESS A COMPANY, 1-26 IN (MECH)			

9. I, (b)(3)(b)(6), WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

1. HAVE YOU DONE ANYTHING THAT YOU THINK IS ILLEGAL IN SECTOR?
1A. NO SIR.

2. HAVE YOU WITNESSED ANY OF YOUR SOLDIERS DO ANYTHING ILLEGAL IN SECTOR?
2A. NO SIR.

3. DO YOU UNDERSTAND THE RULES OF ENGAGEMENT, ESCALATION OF FORCE AND LAW OF ARMED CONFLICT THAT HAS BEEN BRIEFED TO YOU?
3A. ROGER, SIR.

4. HAVE YOU EVER VIOLATED ROE, EOF, AND LOAC WHILE IN SECTOR?
4A. NEGATIVE SIR.

not responsive, doesn't relate the EOF incident, (b)(3)(b)(6)

10. EXHIBIT N	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF 3 PAGES
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ADDITIONAL PAGES MUST CCNTAIN THE HEADING "STATEMENT OF _____ TAKEN AT _____ DATED _____"
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USE THIS PAGE IF NEEDED. IF THIS PAGE IS NOT NEEDED, PLEASE PROCEED TO FINAL PAGE OF THIS FORM.

STATEMENT OF (b)(3)(b)(6) TAKEN AT OLD MOD DATED 2007/03/17

9. STATEMENT (Continued)

10. Nonresponsive, (b)(3)(b)(6)
10/

11. ON THE 1ST OF JANUARY, THE P.L.T RESPONDED TO GUNFIRE FROM ZONE 20 AND BECAME ENGAGED BY AIF INSURGENTS. DID YOU WITNESS LT
) (3)(b)(6) GET OUT OF HIS VEHICLE AND ENGAGE A VEHICLE FROM APPROXIMATELY (2) HOURS WITHOUT PID OR ESCALATION OF FORCE MEASURES BEING
USED?
11A. I WAS ON TOC DUTY.

not responsive, doesn't relate the EOF incident, (b)(3)(b)(6)

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 3 PAGES

PAGE 2 DA FORM 8832 DEC 1992

(b)(2)High

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(b)(3)(b)(6)

Page 111

STATEMENT OF

(b)(3)(b)(6)

TAKEN AT OLD MOD

DATED 2007/03/17

9. STATEMENT (Continued)

AFFIDAVIT

I, (b)(3)(b)(6), HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

(Signature of Person Making Statement)

WITNESSES:

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

(Signature of Person Administering Oath)

ORGANIZATION OR ADDRESS

A CO 1-26 IN

CAMP TAJI

APO AE 09033

ORGANIZATION OR ADDRESS

CPT (b)(3)(b)(6)

(Typed Name of Person Administering Oath)

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE 3 OF 3 PAGES

SWORN STATEMENT

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

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DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION OLD MOD	2. DATE (YYYYMMDD) 2007/03/17	3. TIME 1805HRS	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME (b)(3)(b)(6)	6. SSN (b)(3)(b)(6)	7. GRADE/STATUS PFC	

8. ORGANIZATION OR ADDRESS
A COMPANY, 1-26 IN (MECH)

9. I, (b)(3)(b)(6), WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

1. HAVE YOU DONE ANYTHING THAT YOU THINK IS ILLEGAL IN SECTOR?
1A. NO SIR.

2. HAVE YOU WITNESSED ANY OF YOUR SOLDIERS DO ANYTHING ILLEGAL IN SECTOR?
2A. NO.

3. DO YOU UNDERSTAND THE RULES OF ENGAGEMENT, ESCALATION OF FORCE AND LAW OF ARMED CONFLICT THAT HAS BEEN BRIEFED TO YOU?
3A. YES I DO.

4. HAVE YOU EVER VIOLATED ROE, FOF, AND LOAC WHILE IN SECTOR?
4A. NO I HAVE NOT.

not responsive, doesn't relate the EOF incident, (b)(3)(b)(6)

10. EXHIBIT 0	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF 3 PAGES
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STATEMENT OF (b)(3)(b)(6) TAKEN AT OLD MOD DATED 2007/03/17

9. STATEMENT (Continued)

not responsive, doesn't relate the EOF incident

11. ON THE 1ST OF JANUARY, THE PLT RESPONDED TO GUNFIRE FROM (b)(2)High, ND BECAME ENGAGED BY AIF INSURGENTS. DID YOU WITNESS LT (b)(3)(b)(6) GET OUT OF HIS VEHICLE AND ENGAGE A VEHICLE FROM APPROXIMATELY (b)(2)High WITHOUT PID OR ESCALATION OF FORCE MEASURES BEING USED?

11A. I WAS NOT ON PATROL THAT DAY.

not responsive, doesn't relate the EOF incident

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 3 PAGES

PAGE 2 OF 3 PAGES

(b)(2)High

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CENTC

APD PE v1.01
(b)(3)(b)(6)

ENCL 111