

Page 1 redacted for the following reason:

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Non Responsive

UNCLASSIFIED  
Administrative Law Section  
MNC-I, OIF III

Control Number: (b)(2)High

Internal Suspense: 29-Aug-05

Date Received: 24-Aug-05

Suspense Date:

Type of Action: 15-6 Investigation

Date(s) of Incident: 8/24/2005

Unit(s) Involved: 1/2/194th MP CO, 42nd MP BDE

Appointing Authority COL (b)(3), (b)(6)

Investigating Officer: 1LT (b)(3), (b)(6)

Contact Name

Contact Phone:

Contact Email:

Description Details: LN was seriously wounded when it approached a 194th MP CO convoy at a high rate of speed. Without enough time to use hand signals, the lead gunner used his (b)(2)High and fired a 3 round burst into the engine block.

Remarks:

<u>Action</u>	
Ad Law Action Officer: <u>LTC</u> (b)(3), (b)(6)	
IO Corrections ___ Legal Review Complete <input checked="" type="checkbox"/> Other _____	
Signed out on: _____ By (print): _____ x _____	
IO Corrections ___ Legal Review Complete ___ Other _____	
Signed out on: _____ By (print): _____ x _____	
IO Corrections ___ Legal Review Complete ___ Other _____	
Signed out on: _____ By (print): _____ x _____	
<u>COMMENTS</u>	
_____ _____ _____	

UNCLASSIFIED



REPLY TO  
ATTENTION OF

**HEADQUARTERS  
MULTI-NATIONAL CORPS - IRAQ  
BAGHDAD, IRAQ  
APO AE 09342**

FICI-JA-AL

28 August 2005

MEMORANDUM FOR Commander, 42<sup>nd</sup> Military Police Brigade, Camp Victory, Baghdad, Iraq APO AE 09344

SUBJECT: Report of AR 15-6 Investigation into an Escalation of Force Incident Involving Elements of the 194<sup>th</sup> Military Police Company on 2 August 2005 That Resulted in the Death of (b)(6)

1. I have reviewed the Report of Investigation concerning the facts and circumstances surrounding an escalation of force incident involving elements of the 194<sup>th</sup> Military Police Company on 2 August 2005 that resulted in the death of (b)(6). I find that it is legally sufficient, except as noted below. Note that the Appointing Authority is COL (b)(3), (b)(6), not CPT (b)(3), (b)(6). The investigating officer (IO) needs to sign the DA Form 1574, and that Blocks B and C of Section III do not get filled in unless the proceedings are formal (Block B) and a respondent has been named (Block C).

a. The findings of the Investigating Officer are supported by a preponderance of the evidence as contained in the exhibits.

b. There were no material errors present which would affect the findings and recommendations. There is an issue with the appointment memorandum which specifically asks whether the gunner, SPC (b)(3), (b)(6), was qualified with the weapon used. The IO found that the gunner was given basic instruction including test firing and familiarization fired; he appears not to have actually been qualified.

c. The actions taken during this investigation comply with the legal and procedural requirements of AR 15-6.

d. The recommendations of the Investigating Officer are consistent with the findings. The undersigned recommends that an additional action be directed by the Appointing Authority in Section VIII, that is, that SPC (b)(3), (b)(6) (b)(5) (b)(2)High

2. Recommend the Appointing Authority approve the findings and recommendations by taking the following actions:

a. Strike through the inapplicable language at the top of Section VIII, DA Form 1574, so that it reads "The findings and recommendations of the investigating officer are approved." Add: "SPC (b)(3), (b)(6) is directed to become qualified with the (b)(2)High as soon as is practical."

b. Type your signature block at the bottom of Section VIII, DA Form 1574, and sign above your signature block.

3. The POC for this action is LTC (b)(3), (b)(6) at (b)(3), (b)(6), (b)(2)High or DSN (b)(2)High

FOR THE STAFF JUDGE ADVOCATE:

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

LTC, JA  
Chief, Administrative Law

Encl  
DA Form 1574 w/ encl

007822

# AR 15-6 INVESTIGATION

## Index of Enclosure

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- II. Chronology of Investigation Timeline
- III. DA FORM 2823
- IV. DA FORM 1574
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**Investigating Officer:**

1LT (b)(3), (b)(6)

**16 AUGUST 2005**

007823

# **I. Appointment Memorandum**



DEPARTMENT OF THE ARMY  
HEADQUARTERS, 42<sup>ND</sup> MILITARY POLICE BRIGADE  
CAMP VICTORY, IRAQ  
APO AE 09342

REPLY TO  
ATTENTION OF:

3 Aug 2005

AFZH-MP

MEMORANDUM FOR 1LT [redacted] 59<sup>th</sup> Military Police Company, LSA Diamondback, Iraq

SUBJECT: Appointment of Investigating Officer

1. You are hereby appointed as an investigating officer pursuant to Army Regulation (AR) 15-6, *Procedure for Investigating Officers and Boards of Officers*, to investigate the circumstances surrounding the escalation of force by an element of the 194<sup>th</sup> Military Police Company, resulting in the death of a Local National, on 2 August 2005. Your inquiry should include whether the gunner was properly qualified on the weapon he used to fire the warning shots.

2. You should complete your investigation in accordance with the procedures set forth in AR 15-6. If, during the course of your investigation, you suspect that individuals may have committed misconduct or criminal activity, you are required to advise them of their rights under Article 31, UCMJ, or the Fifth Amendment (as appropriate), both orally and in writing.

3. You are directed to obtain sworn statements from all witnesses and ensure that each witness completes a Privacy Act disclosure form. If you are unable to obtain a sworn statement from a particular witness, you will prepare a detailed memorandum for record, memorializing the interview and explaining why a sworn statement was not obtained.

4. CPT [redacted] Administrative Law Attorney, MNC-1, will serve as your legal advisor. Before proceeding, contact her at DSN [redacted] or [redacted] for a pre-investigation briefing.

5. Upon completion of your investigation, you will prepare a written report of your findings and recommendations for disposition. Ensure that all recommendations are consistent with your findings of fact. Your investigation should be completed within seven calendar days of the date of this memorandum. Any delays beyond seven calendar days must be approved by me, in writing.

6. The point of contact for this memorandum is CPT [redacted] 42<sup>nd</sup> Military Police Brigade Judge Advocate, at DSN [redacted] or [redacted]

[redacted]  
(b)(3), (b)(6)

COL, MP  
Commanding

## **IV. DA FORM 1574**

## 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 CPT (b)(3), (b)(6) 42nd Military Police Brigade Judge Advocate  
(Appointing authority)

on 3 August 2005 (Attach inclosure 1: Letter of appointment or summary of oral appointment data.) (See para 3-15, AR 15-6.)  
(Date)

### SECTION II - SESSIONS

The (investigation) (board) commenced at LSA Diamonback, Mosul, Iraq at 0910 hrs  
(Place) (Time)

on 4 August 2005 (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 1526 hrs on 15 August 2005  
(Time) (Date)  
and completed findings and recommendations at 2128 hrs on 16 August 2005  
(Time) (Date)

### SECTION III - CHECKLIST FOR PROCEEDINGS

#### A. COMPLETE IN ALL CASES

		YES	NO <sup>1/</sup>	NA <sup>2/</sup>
1	Inclosures (para 3-15, AR 15-6)			
	Are the following inclosed and numbered consecutively with Roman numerals: (Attached in order listed)			
	a. The letter of appointment or a summary of oral appointment data?	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: <sup>1/</sup> Explain all negative answers on an attached sheet.

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

007827

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

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

FACTS: On 2 August 2005, at approximately 0750 hours, 1/2/194th MP CO was convoying from LSA Diamondback, Mosul toward the Al Kindi Army Base, also located in Mosul, Iraq.

(b)(2)High (b)(2)High The squad consisting of SGT (b)(3), (b)(6) as the TC, SGT (b)(3), (b)(6) was the Driver, SPC (b)(3), (b)(6) was the Gunner, and an interpreter named (b)(6) was in the (b)(2)High vehicle (b)(2)High The (b)(2)High vehicle consisted of 2LT (b)(3), (b)(6) who sat behind the (TC) seat, SGT (b)(3), (b)(6) as (TC), SPC (b)(3), (b)(6) was the medic, who sat behind the driver. SPC (b)(3), (b)(6) was the Gunner and PFC (b)(3), (b)(6) was the Driver of this vehicle (b)(2)High The (b)(2)High vehicle (b)(2)High consisted of SGT (b)(3), (b)(6) as (TC), SPC (b)(3), (b)(6) as the driver and SPC (b)(3), (b)(6) as the truck's gunner. On 020730AUG05, 1st Squad conducted an oral mission brief which consisted of the squad's mission, MP battle drills, the current ROE, the current BOLO sheet and latest SIGACTS. On reception of route clearance, the squad commenced movement toward Al Kindi Army Base exiting LSA Diamondback through the West Gate and headed due north on RTE (b)(2)High After traveling approximately 2 kilometers on (b)(2)High the convoy conducted a right turn on RTE (b)(2)High at grid coordinate (b)(2)High the squad then traveled due east, approximately (b)(2)High meters, before conducting a left turn, at grid coordinate (b)(2)High and continuing on RTE (b)(2)High for another (b)(2)High meters approaching the RTE (b)(2)High RTE (b)(2)High intersection. As the squad approached the intersection, the lead vehicle slowed down to approximately (b)(2)High mph, while SPC (b)(3), (b)(6) used arm and hand signals, to clear the intersection of all local traffic to ensure a safe crossing of all the squad's vehicles through the intersection to prevent any collision with any civilian vehicles and protection from insurgents who might employ their vehicle to be used as an SVIEBD. SGT (b)(3), (b)(6) perceived the intersection clear of any suspicious vehicles, his vehicle then proceeded through the intersection and the other vehicles followed maintaining constant watch for any person or persons who might engage the convoy to cause casualties amongst coalition forces. The squad of Military Police then increased their rate of speed to approximately (b)(2)High mph for about (b)(2)High meters before approaching a five-way intersection consisting of smaller, less traveled local roads by coalition forces. As the lead vehicle slowed to about (b)(2)High mph, the gunner, SPC (b)(3), (b)(6) started using arm and hand signals (b)(2)High (b)(2)High

The driver, SGT (b)(3), (b)(6) was honking the vehicle's horn to signal to local traffic that a convoy was approaching. SGT (b)(3), (b)(6) observed that local traffic did regard the convoy's presence and the convoy's intentions and all civilian vehicles from all five directions did stop and/or pull over to the side of the road to facilitate an easy and safe movement of the convoy. Simultaneously, SGT (b)(3), (b)(6) perceived the intersection safe to proceed through and began to push the acceleration pedal to the truck and SPC (b)(3), (b)(6) (b)(2)High when SGT (b)(3), (b)(6) slammed on the vehicle's brakes. At this time, SPC (b)(3), (b)(6) was still looking at vehicles at his 2 o'clock and then looking toward the left noticed a yellow in color vehicle crossing through the intersection at a high rate of speed, that he approximates between 30-40 mph, closing in on his vehicle. Since his (b)(2)High is a crew served weapon, he opted to use his (b)(2)High weapon system to fire warning shots into the vehicle's engine block to disable the vehicle since (b)(2)High and in direct line with his vehicle. Because the car was traveling at such a high rate of speed, it was too late for arm and hand signals and trying to engage the vehicle with the (b)(2)High would have cost too much time to maneuver, so he decided to use the (b)(2)High and attempted to fire a three round burst into the vehicle's engine block as it crossed directly in front of the M1114. One round penetrated the engine block and the other two rounds penetrated the right side of the vehicle. SGT (b)(3), (b)(6) ordered his vehicle to proceed through the intersection fearing that it was an unsuccessful SVIED attack. The civilian vehicle continued to travel in the same direction approximately another 50 meters and then pulled to the side. At this time, SGT (b)(3), (b)(6) who was the TC in the second vehicle, proceeded through the intersection and noticed the civilian vehicle stopped and two local nationals were attempting to pull the civilian out of the engaged vehicle. Upon noticing blood on the clothes of the civilian of the engaged vehicle, she notified the convoy by radio that the driver of the engaged vehicle was wounded and that the medic, SPC (b)(3), (b)(6) 2LT (b)(3), (b)(6) and herself were dismounting from their vehicle and will attempt to perform first aid to the male driving the engaged civilian vehicle.

(See continuation on page 5.)

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

In view of the above findings, the (investigating officer) (board) recommends:  
Rules of Engagement were followed throughout the convoy's movement, and precautions were taken prior to entering every intersection to ensure a safe passage to the squad's destination. The CFLCC ROE CARD clearly states (b)(2)High (b)(2)High (b)(2)High After the incident, the squad's actions show that they were not reckless, since they rendered first aid, assessed that the victim required more advanced medical attention and conducted the evacuation of the civilian to the CSH on LSA Diamondback. (b)(5) (b)(3), (b)(6) The 194th MP CO SOP on convoy operations, MP Battle Drills, current SIGACTS and the ROE brief that is given prior to every convoy mission is more than sufficient that enabled first squad to handle this incident in the professional manner in which it was conducted.

(Section IV-Findings)-continued

As SGT (b)(3), (b)(6) and SPC (b)(3), (b)(6) attempted first aid on the wounded civilian for approximately five minutes, it was decided to evacuate the civilian to the CSH back on LSA Diamondback to render necessary medical attention. By radio communication, SGT (b)(3), (b)(6) notified 194th MP CO TOC of the current situation and returned to LSA Diamondback transporting the local national to the CSH where the civilian died an hour and a half later from the gun-shot wounds to the right side of his abdomen. The deceased was identified as (b)(6). In accordance to the appointment memorandum, paragraph (1), SPC (b)(3), (b)(6) was given the Basic Rifle Marksmanship and Pre-Marksmanship Instruction on the (b)(2)High weapon system concluding with test fires and a familiarization range conducted at the (b)(2)High in May 2005.

007829

## **II. Chronology of Investigation Timeline**



DEPARTMENT OF THE ARMY  
59th MILITARY POLICE COMPANY  
LSA Diamondback, Mosul, Iraq  
APO, AE 09334

AFZC-Y-P-59

16 August 2005

MEMORANDUM FOR RECORD

SUBJECT: CHRONOLOGICAL TIMELINE OF INVESTIGATION

1.

<u>WHO</u>	<u>CHRONOLOGICAL TABLE INFORMATION</u>	<u>WHEN</u>
CPT (b)(3), (b)(6) 59 <sup>TH</sup> MP CO COMMANDER	VERBALLY NOTIFIED 1LT (b)(3), (b)(6) OF HIS APPOINTMENT AS IO	2 AUG 05
CPT (b)(3), (b)(6) 194 <sup>TH</sup> MP CO COMMANDER	PRINTED A COPY OF SWORN STATEMENTS OF SQUAD MEMBERS AND SIR	4 AUG 05
1LT (b)(3), (b)(6)	CONDUCTED INTERVIEWS WITH 2LT (b)(3), (b)(6) SGT (b)(3), (b)(6) SPC (b)(3), (b)(6) SGT (b)(3), (b)(6) AND SGT (b)(3), (b)(6)	4 AUG 05
1LT (b)(3), (b)(6)	RECEIVED BOLO LIST, SIGACTS, SKETCHES AND DTU FROM 2LT (b)(3), (b)(6)	9 AUG 05
1LT (b)(3), (b)(6)	RECEIVED APPOINTMENT MEMORANDUM FROM CPT (b)(3), (b)(6)	9 AUG 05
1LT (b)(3), (b)(6)	RECEIVED PHOTOS OF THE INTERSECTION FROM 2LT (b)(3), (b)(6) AND OBTAINED MEDICAL RECORDS OF DECEASED CIVILIAN	12 AUG 05
1LT (b)(3), (b)(6)	RECEIVED SWORN STATEMENT OF WEAPON FAMILIARIZATION BY SGT (b)(3), (b)(6)	15 AUG 05

007831

### **III. DA FORM 2823**

**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 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 MOSUL, IRAQ	2. DATE (YYYYMM) 2005/08/10 (b)(3), (b)(6)	3. TIME 1200 (b)(3), (b)(6)	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME (b)(3), (b)(6)	6. SSN (b)(3), (b)(6)	7. GRADE/STATUS E5/ACTIVE	
8. ORGANIZATION OR ADDRESS 194TH MILITARY POLICE COMPANY, MOSUL, IRAQ			

(b)(3), (b)(6) \_\_\_\_\_, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

UPON BECOMING SQUAD LEADER OF 2ND SQUAD, 2ND PLATOON O/A MAY 05 I ASSESSED THE STRENGTHS AND WEAKNESSES WITHIN EACH TEAM IN THE SQUAD. AFTER DISCUSSING IT WITH THE TEAM LEADER (SGT (b)(3), (b)(6)) I DECIDED TO SWITCH POSITIONS WITHIN HIS TEAM (C TEAM), MAKING PFC (b)(3), (b)(6) THE DRIVER AND PFC (THEN PV2) (b)(3), (b)(6) THE GUNNER. BEFORE IMPLEMENTING THIS DECISION I ENSURED PFC (b)(3), (b)(6) WAS TRAINED ON ALL ASPECTS OF THE WEAPONS HE WOULD BE USING. THIS INCLUDES BUT IS NOT LIMITED TO CLEARING AND LOADING, DISASSEMBLY, REASSEMBLY, FUNDAMENTALS OF MARKSMANSHIP AND THE ROLE OF THE GUNNER IN A TEAM. (b)(2)High

(b)(2)High (b)(2)High (b)(2)High (b)(2)High ON NUMEROUS OCCASIONS PFC (b)(3), (b)(6) FIRED HIS (b)(2)High AT THESE RANGES, TO FAMILIARIZE AND TO TEST FIRE. I AM UNSURE OF THE TRAINING PFC (b)(3), (b)(6) RECEIVED AT HIS PREVIOUS UNIT. WHEN ASKED IF HE HAD ATTENDED A (b)(2)High RANGE WITH HIS LAST UNIT, HE REPLIED YES. FURTHER QUESTIONING REVEALED HE HAD ATTENDED, BUT NOT FIRED, AT THIS RANGE. BEFORE GIVING ANY SOLDIER A NEW PIECE OF EQUIPMENT, I ENSURE THEY ARE TRAINED TO STANDARD, USING ALL AVAILABLE RESOURCES. PFC (b)(3), (b)(6) IS AN EXTERMELY COMPETENT SOLDIER, AND PICKED UP ON THE BASICS OF NOT ONLY THE (b)(2)High BUT HIS ROLE AS A GUNNER IN THE TEAM AND SQUAD. EVERY DAY BEFORE MISSION THE GUNNERS WOULD BE BRIEFED ON THE PROPER ESCALATION OF FORCE. (b)(2)High

(b)(2)High THEY ARE ALSO BRIEFED ON ALL VEHICLES ON THE BOLO LIST. I HAVE BRIEFED NUMEROUS TIMES THAT THE PROTECTION OF MY SOLDIERS IS FIRST AND FOREMOST, SO AS TO LEAVE NO DOUBT IN THE MINDS OF THE GUNNERS WHEN IT IS APPROPRIATE TO FIRE. I DO THIS TO ERASE ANY HESITATION THAT MAY GET MY SOLDIERS KILLED. PFC (b)(3), (b)(6) WAS TRAINED PROPERLY ON THE WEAPON AND HIS JUDGEMENT WAS SOUND. /// END OF STATEMENT ///

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

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT (b)(3), (b)(6)	PAGE 1 OF <u>2</u> 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.

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

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 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 LSA Diamondback, Mosul, Iraq	2. DATE (YYYYMMDD) 2005/08/02	3. TIME 1823	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME (b)(3), (b)(6)	6. SSN (b)(3), (b)(6)	7. GRADE/STATUS E-5/ Active	
8. ORGANIZATION OR ADDRESS 194th MP CO LSA Diamondback, Mosul, Iraq APO AE 09334			

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

(b)(3), (b)(6) On August 2, 2005, elements of Tribe 2-1 were in route to FOB Courage at approximately 0750. I was in the first vehicle in a (b)(2)High vehicle convoy, 2-1 C, consisting of SGT (b)(3), (b)(6) (driver), PFC (b)(3), (b)(6) (gunner) and myself. We had just come off Route (b)(2)High and were traveling North-East toward 1W, when we came to an intersection at grid (b)(2)High. Before entering the intersection, SGT (b)(3), (b)(6) slowed down to make sure that it was clear. We traveled through the intersection at approximately (b)(2)High n.h. once the intersection was clear. Also from the gunners position PFC (b)(3), (b)(6) was standing in the turret scanning with his issued (b)(2)High. Before we made it to the east bound traffic lane, I noticed the Humvee come to an abrupt halt. I was looking to the right of the vehicle and scanned to the left. Once my eyes reached about the 1100 position, I noticed a yellow Passat, traveling at a high rate of speed, in front of our vehicle. The vehicle was moving as the shots were being fired and continued to move past our vehicle. We proceeded to move North-East, in fear that it was a failed SVBIED attack and didn't want to give him a second chance at an attack. After moving approximately 50 meters from the place of incident, I received a call over the radio from 2-1 B (SGT (b)(3), (b)(6)) stating that the vehicle had come to a stop and the driver was shot. We pulled our vehicle to the side of the road and took up a security position for the medic (SPC (b)(3), (b)(6)) to conduct first aid to the casualty. SGT (b)(3), (b)(6) called over the radio again to state that one of the rounds hit in the hood of the vehicle and two in the side of the vehicle, and that the driver was shot in the side of his stomach. She also stated that SPC (b)(3), (b)(6) was performing first aid on the casualty and that we were preping to evac the casualty to the CSH on LSA Diamondback. After approximately 5-7 minutes after the incident, initial first aid was performed on the casualty and the casualty was placed into SGT (b)(3), (b)(6) vehicle. We then proceeded to medevac the casualty to the CSH on LSA Diamondback. When I asked PFC (b)(3), (b)(6) about his actions, he stated that he felt our lives were in danger because of the vehicle being a possible SVBIED in it's reaction toward our convoy. He also stated that he aimed at the hood of the vehicle and not the side of the vehicle and that he felt the rounds that entered through the side of the vehicle were due to the speed and travel of the vehicle.

/// End of Statement ///

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

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

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

10. EXHIBIT	INITIALS OF PERSON MAKING STATEMENT (b)(3), (b)(6)	PAGE 1 OF 2 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.



SWORN STATEMENT

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

PRIVACY ACT STATEMENT

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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: LSA Diamondback, Mosul, Iraq
2. DATE (YYYYMMDD): 05 Aug 05
3. TIME: 1823
4. FILE NUMBER:
5. LAST NAME, FIRST NAME, MIDDLE NAME: (b)(3), (b)(6)
6. GRADE/STATUS: E-5/RA
8. ORGANIZATION OR ADDRESS: 144th MP CO

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

On 02 Aug 05 approx: 0756 hrs Tribe 21, A, B and C was conveying to FOB Courage. While in the lead vehicle as the Driver we had just got off of (b)(2)High go toward one west IP station. That's when we came up to and intersection at (b)(2)High that's when clear the intersection by slow down about (b)(2)High mph all the cars was stop so I proceed toward the intersection that's when I here about 3 to 5 shots fire that (b)(3), (b)(6) Then a yellow in color sedan drove wright in front of my vehicle and at that time they truck came to a stop while the yellow in color sedan drove about 50 more meters so my continue mission and that's when Tribe 21 B call us on the radio and said the guy in the yellow in color sedan was shot so we turn around and pick up security. SPC (b)(3), (b)(6) put the guy on 21 B vehicle and took him to LSA D-Backs,

10. EXHIBIT:
11. INITIALS OF PERSON MAKING STATEMENT: (b)(3), (b)(6)
PAGE 1 OF 2 PAGES
TAKEN AT: DATED:
ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF"
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE BE INDICATED.

STATEMENT OF

TAKEN AT

DATED

STATEMENT (Continued)

*NOT USED*

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

**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 OR UNLAWFUL INDUCEMENT OR UNLAWFUL INFLUENCE.

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

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 2 day of Aug, 2005 at USA Diamond base Mosul Iraq

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

(Signature of Administering Oath)

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

(Administering Oath)

ART 136 (b)(4) UCMJ  
(Authority To Administer Oaths)

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

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

PAGE 2 OF 2 PAGES

007037

SWORN STATEMENT

For use of this form, see AR 180-45; 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 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 Mosul, Iraq 2. DATE (YYYYMMDD) (3), (b)(6) 20050802 3. TIME (3), (b)(6) 2004 4. FILE NUMBER

5. LAST NAME, FIRST NAME, MIDDLE NAME (b)(3), (b)(6) 6. SSN (b)(3), (b)(6) 7. GRADE/STATUS E-3

8. ORGANIZATION OR ADDRESS 2/199th MP Co

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

On the morning of 2 Aug 05 at around 0745 my Squad was on route to FOB Courage, I was in the middle truck 22B. Our convoy was traveling down a road north east towards one west, when we approached an intersection. The lead truck 22C slowed down before going through the intersection, as they started to go through a yellow Sudan came towards them at a high rate of speed, in which the gunner PFC (b)(3), (b)(6) did not have enough time to use verbal or visual signals to make the car slow down. PFC (b)(3), (b)(6) fired a 3-5 round burst at the front of the car at which time the car came to a stop. 22C drove through the intersection and I drove my truck towards the intersection. When my truck got to the car SGT (b)(3), (b)(6) and 2LT (b)(3), (b)(6) saw that people were pulling out someone of had been injured. Both them got out and our medic (b)(3), (b)(6) SPC (b)(3), (b)(6) as well to attend to the person. After about 5-7 minutes I turned my truck around so we could load the injured person into the truck. After the person was loaded

10. EXHIBIT 11. INITIALS OF PERSON MAKING STATEMENT (b)(3), (b)(6) PAGE 1 OF 2 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.

STATEMENT OF

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

TAKEN AT

Mosul, Iraq

DATED

20050802

STATEMENT (Continued)

into the truck I saw that it was an older man, SGT (b)(3), (b)(6) and 2LT (b)(3), (b)(6) got back into the truck and we evacuated the man to the CSU.

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

/// END OF STATEMENT ///

AFFIDAVIT

(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.

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

(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 2 day of August, 2005 at LSA Diamondback Mosul, Iraq

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

(Administering Oath)

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

(Administering Oath)

ART 136 (b)(4) UCMJ (Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

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

PAGE 2 OF 3 PAGES

007539

**SWORN STATEMENT**

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

**PRIVACY ACT STATEMENT**

**AUTHORITY:** Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1983 (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 Mosul Iraq APO AE 09334	2. DATE (YYYYMMDD) 20050802	3. TIME 2000	4. FILE NUMBER
--	--------------------------------	-----------------	----------------

5. LAST NAME, FIRST NAME, MIDDLE NAME (b)(3), (b)(6)	6. SSN (b)(3), (b)(6)	7. GRADE/STATUS E-5/ACT
---	--------------------------	----------------------------

8. ORGANIZATION OR ADDRESS  
2194th MP Co. Mosul, Iraq APO AE 09334

9. I, (b)(3), (b)(6) WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH: On 20050802 At approx. 0745 we were in A convoy, enroute to AL KINDI AND Curage to conduct (b)(2)High. I WAS sitting in the team leader seat, right front seat of the second vehicle in the convoy. Tribe 2-1C was in the lead. As Tribe 2-1C, driver SGT. (b)(3), (b)(6) Approached An intersection At (b)(2)High which At that time our element slowed down to ensure All traffic WAS stopped before proceeding into the intersection. As 2-1C proceeded into the intersection A CAR came from the left side of the intersection. Tribe 2-1C stopped And I heard some rounds being fired. The vehicle then proceeded out of the intersection And Tribe 2-1C continued threw the intersection. Upon my Arrival to the intersection All traffic was still stopped. As my truck proceeded thru the intersection I looked to my right And I noticed the car had stopped and some locals were helping An older guy out of the car and I noticed blood. I could not tell you if anyone else was in the car because when I got to the intersection only the old guy was getting out of the car. I advised the lead truck to stop, 2nd LT (b)(3), (b)(6), SPC (b)(3), (b)(6) and myself got out of my truck and went over to the individual so he could be evaluated And treated by our medic. We decided to evac to the CSH. I notified our TOC About the situation that happened And that we were returning to the FOB with the casualty. I can't honestly tell you the color of the car because I was more concerned About security And the casualty. // END OF STATEMENT

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT (b)(3), (b)(6)	PAGE 1 OF 2 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.

007840

STATEMENT OF

TAKEN AT

DATED

STATEMENT (Continued)

*[Faded, mostly illegible handwritten text, possibly a continuation of a statement.]*

*Handwritten:* No person used

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

**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.

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

(Signature of person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 2<sup>nd</sup> day of August 2005 at LSA Diamondback Mosul, Iraq

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

Oath)

ORGANIZATION OR ADDRESS

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

ring Oath)

ORGANIZATION OR ADDRESS

ART 136(b)(4) UCMJ

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

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

PAGE 2 OF 2 PAGES

007841

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

### 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. 8397 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.

<b>1. LOCATION</b> LSA Diamondback, Mosul, Iraq	<b>2. DATE (YYYYMMDD)</b> 2005/08/02	<b>3. TIME</b> 2323	<b>4. FILE NUMBER</b>
<b>5. LAST NAME, FIRST NAME, MIDDLE NAME</b> (b)(3), (b)(6)	<b>6. SSN</b> (b)(3), (b)(6)	<b>7. GRADE/STATUS</b> E-4/ Active	
<b>8. ORGANIZATION OR ADDRESS</b> 194th MP CO LSA Diamondback, Mosul, Iraq APO AE 09384			

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

on the 2nd of August 2005, at about 0750, traveling northeast toward Iw. I was riding the gunners hatch, Sgt (b)(3), (b)(6) was driving, and Sgt (b)(3), (b)(6) was in the TC (front passenger side). We were in the front vehicle of our convoy which consisted of (b)(2) High vehicles. We came up on an intersection at grid (b)(2) High. Upon arriving at the intersection Sgt (b)(3), (b)(6) slowed down until all remaining traffic cleared the intersection. I was standing up in the gunners hatch, I grabbed my (b)(2) High which was not mounted and began scanning the intersection (b)(2) High. I looked at the traffic to the left first all vehicles had stopped, Sgt (b)(3), (b)(6) had then proceeded through the intersection. While scanning to the right the vehicle came to a halt, and I saw a yellow in color passat coming from the left at a high rate of speed. My (b)(2) High mounted was pointed to a 10 position while I was at a 2 position when I saw the vehicle coming. I then adjusted fire to a 12 position. When adjusting my fire to my 12 the yellow in color passat had already moved to my vehicles 11 at about (b)(2) High my vehicle. I quickly reacted to the threat switching my (b)(2) High from safe to fire aiming at the hood of the vehicle I squeezed the trigger delivering a three round burst while still maintaining a 12 position. The vehicle passed the front of our vehicle and, Sgt (b)(3), (b)(6) proceeded through the intersection. I continued scanning toward the front of our vehicle to ensure our security. When crossing the intersection Sgt (b)(3), (b)(6) stopped the vehicle and turned around back to the intersection, and I pulled security to our vehicles (b)(2) High while our platoon medic (SP6) (b)(3), (b)(6) assessed the casualty for about 5 minutes, and then we medevaced the casualty in SGT (b)(3), (b)(6)s truck to the CSH at LSA Diamondback.

*At End of Statement // (b)(3), (b)(6)*

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

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

<b>10. EXHIBIT</b>	<b>INITIALS OF PERSON MAKING STATEMENT</b> (b)(3), (b)(6)	<b>PAGE 1 OF 2 PAGES</b>
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF" AND BE DATED.

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

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

STATEMENT

Mosul, Iraq

DATE: 2005 08 07

Not Use

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

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 FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE  
BY ME. IT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS  
STATEMENT WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT FEAR OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

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

Signature of Person Making Statement

Subscribed and sworn to before me, a person authorized by law to  
administer oaths, this 7 day of August 2005  
at LSA Diamondback, Mosul, Iraq

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

SGT

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

Signature of Person Administering Oath

ART 136 (8)(4) UCMJ

Authority To Administer Oaths

STATEMENT

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

## **V. Index of Exhibits**

**EXHIBIT A- SKETCHES OF INTERSECTION**

**EXHIBIT B- PHOTOS OF INTERSECTION**

**EXHIBIT C- CFLCC ROE CARD**

**EXHIBIT D- SIR**

**EXHIBIT E- CERTIFICATE OF DEATH**

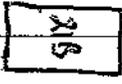
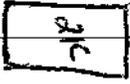
**EXHIBIT F- OTHER DOCUMENTS NOT ENTERED AS  
EVIDENCE (BOLO LIST, DTU, SIGACTS)**

# **EXHIBIT A- SKETCHES OF INTERSECTION**

Yellow Sedan



Stop



(b)(2)High

21C vehicle  
Stop cause the yellow sedan was still going

Stop Vehicle

The yellow sedan stop about 50 feet from the intersection

Talk (b)(2)High

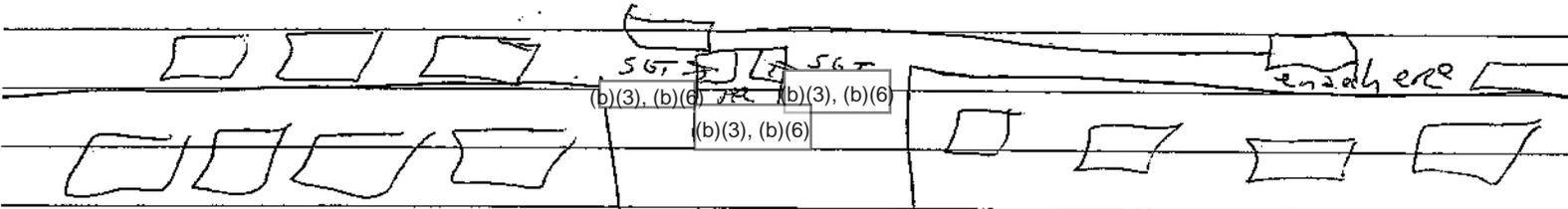
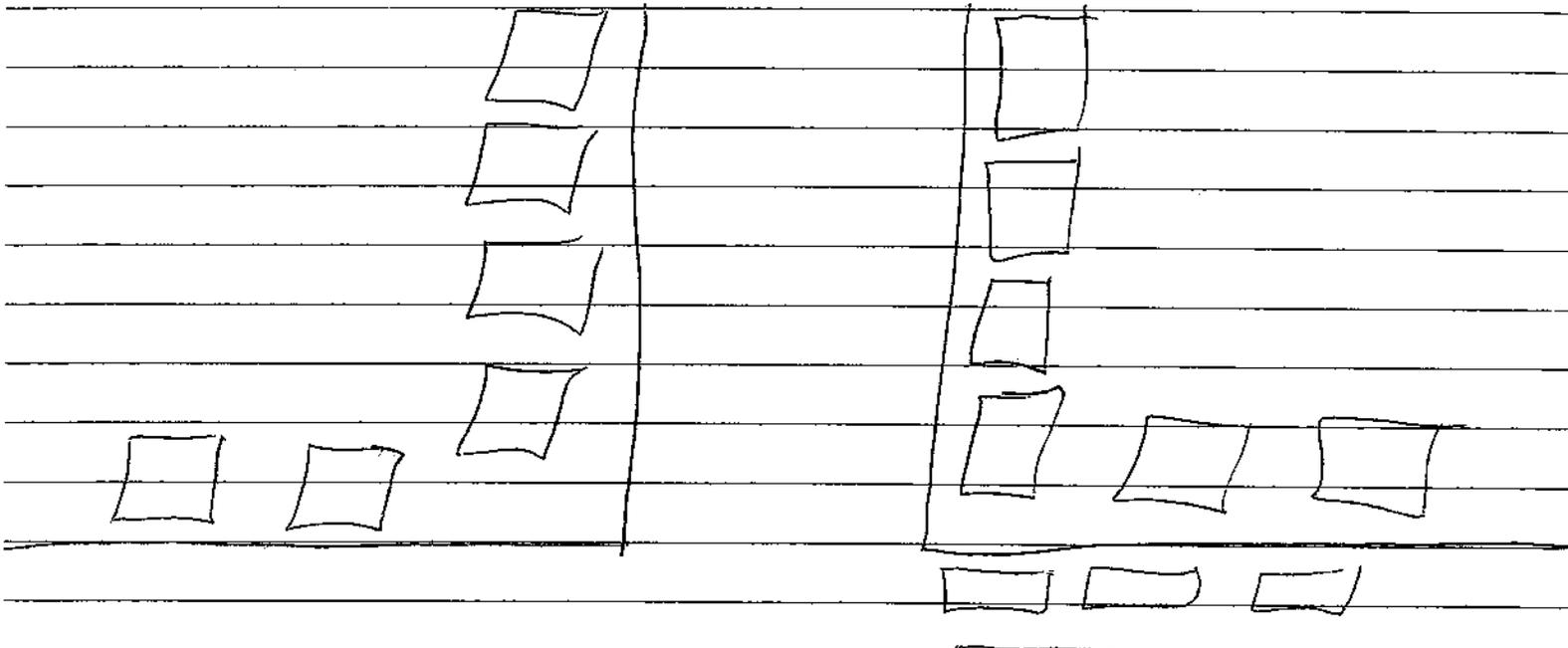
Sgt PFC LT SPC Drivers (b)(3), (b)(6)

Sgt Sst SPC Team leader (b)(3), (b)(6)

PFC SPC dunnery (b)(3), (b)(6)

gar

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



SGT [redacted] SGT [redacted]  
(b)(3), (b)(6) (b)(3), (b)(6)  
(b)(3), (b)(6)

enabhere [redacted]

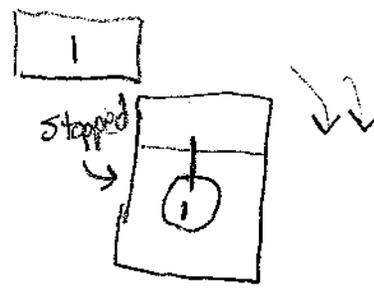
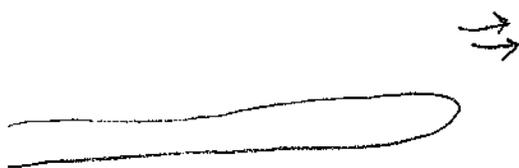
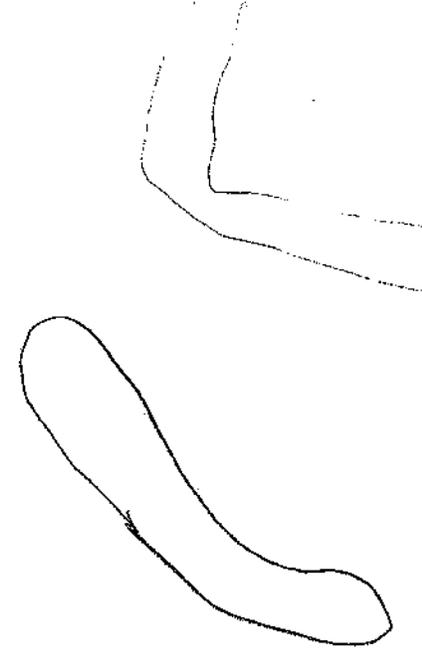
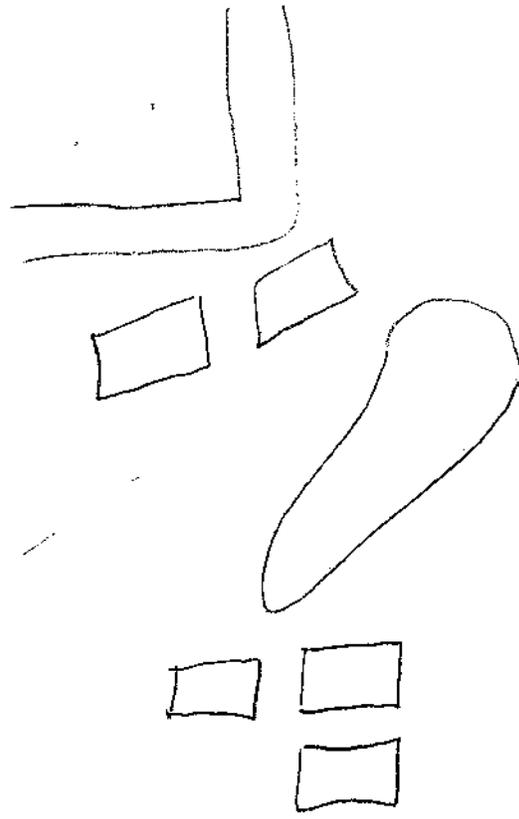
SGT [redacted] SGT [redacted]  
(b)(3), (b)(6) (b)(3), (b)(6)  
(b)(3), (b)(6) (b)(3), (b)(6)

[redacted] 2-1A

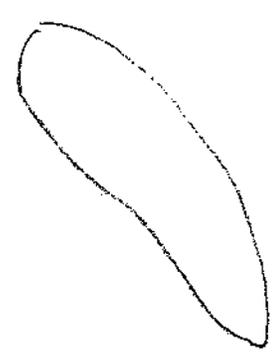
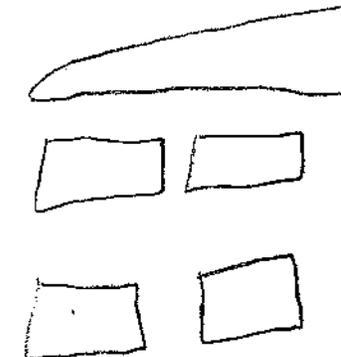
007847

SGT (b)(3), (b)(6)

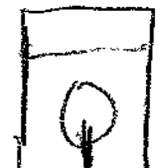
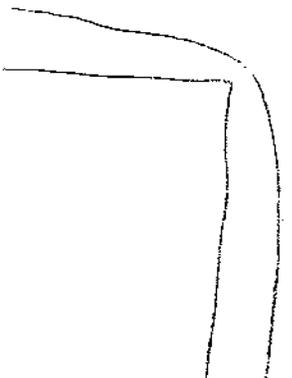
02



2



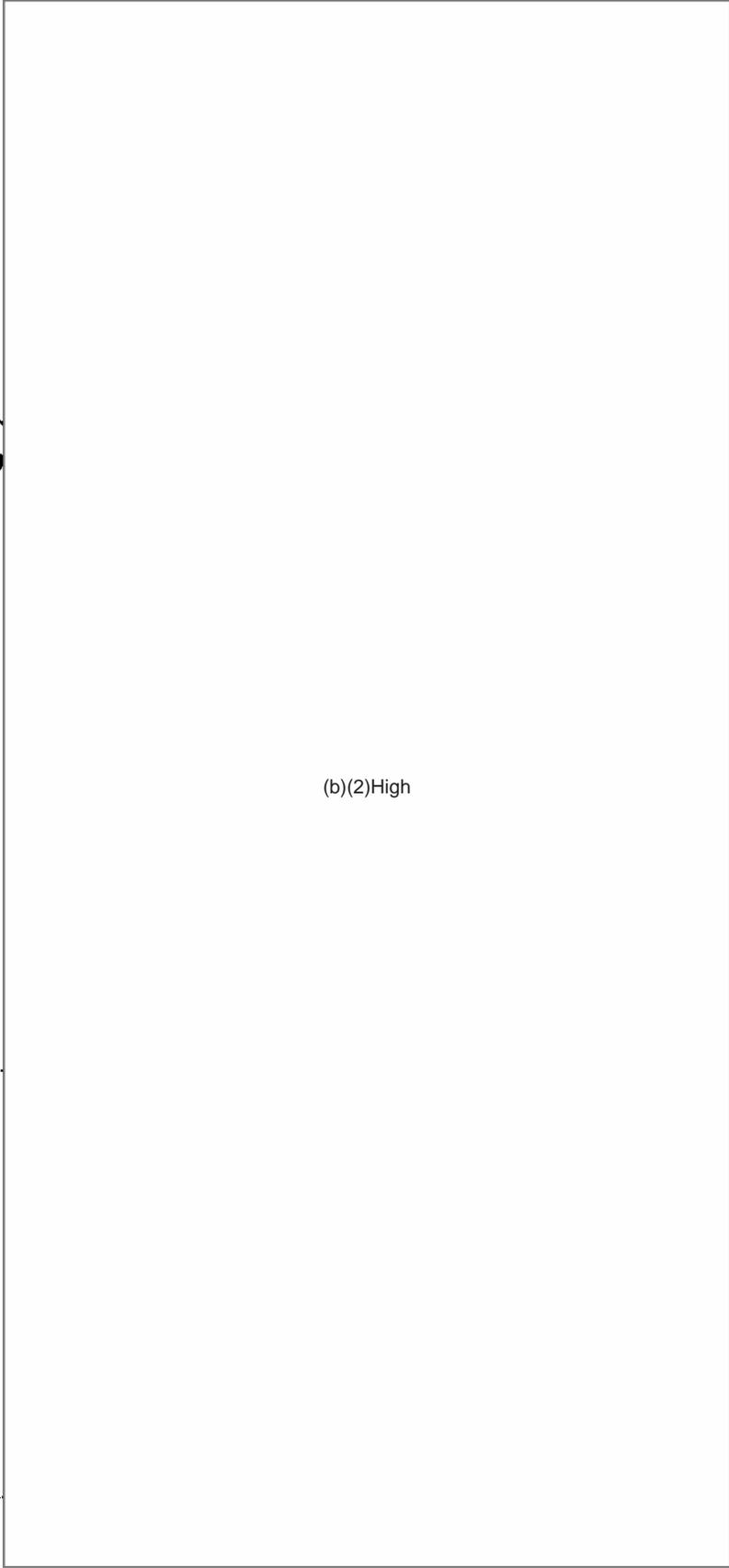
3



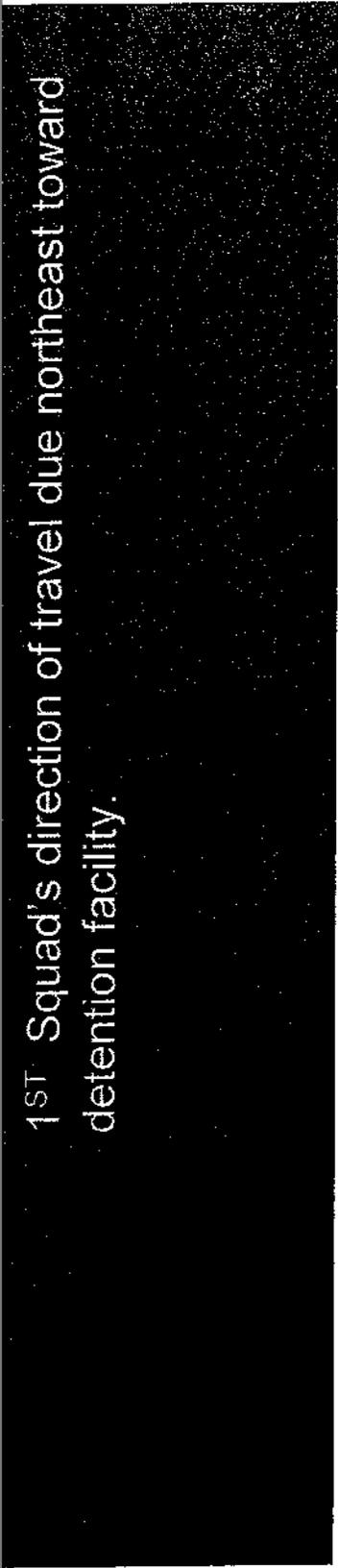
007848

SGT (b)(3), (b)(6)

# **EXHIBIT B- PHOTOS OF INTERSECTION**

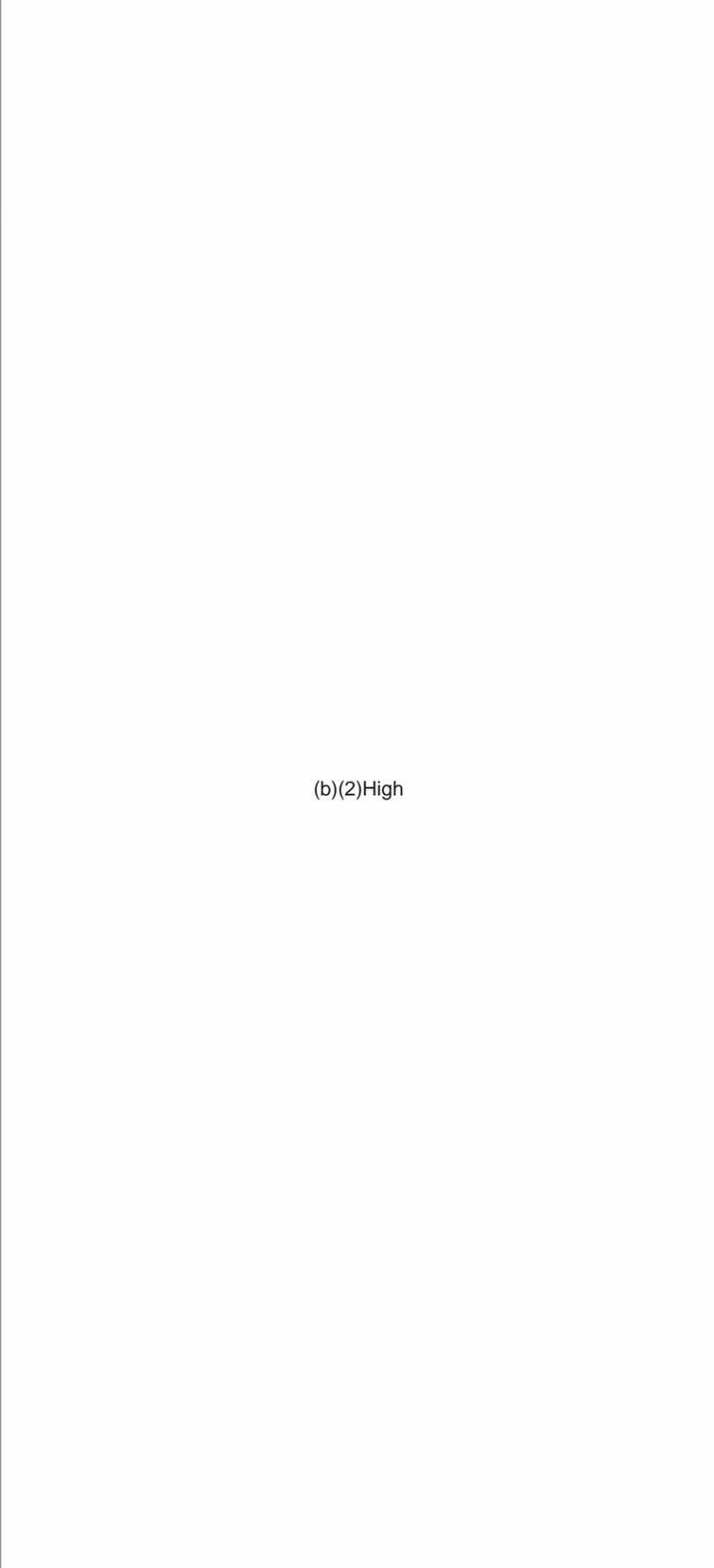


(b)(2)High



1<sup>ST</sup> Squad's direction of travel due northeast toward detention facility.

↑



(b)(2)High

Civilian vehicle approached  
from this side road due  
southeast.

(b)(2)High

After being engaged, vehicle later stopped 50 meters south of intersection.

# **EXHIBIT C- CFLCC ROE CARD**

# **EXHIBIT D- SIR**

## Serious Incident Report

Subject:

1. **Category:** Escalation of Force
2. **Type of Incident:** Deadly Force utilized at potential threat vehicle
3. **Date/Time of incident:** 020750AUG05

4. **Location:**

5. **Other information:**

6. **Personnel Involved**

a. **Name:**

1. **Pay Grade:** O-1
2. **SSN:**
3. **Race:**
4. **Sex:** Male
5. **Position:** Platoon Leader
6. **Security Clearance:** Secret
7. **Units and Station of Assignment:** 194<sup>th</sup> MP Co, LSA Diamondback, Iraq
8. **Duty Status:** Active
9. **Age:** 33

b. **Name:**

1. **Pay Grade:** E-4
2. **SSN:**
3. **Race:**
4. **Sex:** Male
5. **Position:** Team Leader
6. **Security Clearance:** Secret
7. **Units and Station of Assignment:** 194<sup>th</sup> MP Co, LSA Diamondback, Iraq
8. **Duty Status:** Active
9. **Age:** 27

007855

Appendix 1 (IR/SIR Reporting Format)

c. Name: (b)(3), (b)(6)

1. Pay Grade: E-3

2. SSN: (b)(3), (b)(6)

3. Race: (b)(6)

4. Sex: male

5. Position: gunner

6. Security Clearance: Secret

7. Units and Station of Assignment: 194<sup>th</sup> MP Co, LSA Diamondback, Iraq

8. Duty Status: Active

9. Age: 20

7. Summary of Incident:

On 020750AUG(L)05 1<sup>st</sup> Sqd, 2<sup>nd</sup> Plt, 194 MP Co was traveling on a local road just off of ROUTE (b)(2)High to the Al Kindi Army Base from LSA DIAMONDBACK. The squad had stopped prior to crossing the intersection @ (b)(2)High to ensure that all traffic had stopped. Numerous LN vehicles stopped and a yellow in color sedan operated by a LN Male pulled around from behind some vehicles already stopped traveling South-East and approached the convoy at a high rate of speed and came within (b)(2)High. A gunner (PFC (b)(3), (b)(6)) went through the ROE using presentation of deadly force. A three-round warning shot was then fired from an (b)(2)High in front of the vehicle and due to the local national vehicle's speed the rounds hit the vehicle on the passenger's side and struck the driver in the abdomen. The car was searched with nothing significant to report. The driver was given immediate first-aid and evacuated to the 228<sup>th</sup> CSH on LSA DIAMONDBACK.

8. Remarks

9. Publicity None expected outside the unit.

10. Command Reporting Logged, C3, CofS notified

11. POC: SFC (b)(3), (b)(6) Operations NCO.

12. Downgrading Instructions

13. Approved/Released By:

007856

**EXHIBIT E- CERTIFICATE OF DEATH**

**CERTIFICATE OF DEATH (OVERSEAS)**  
Acte de décès (D'Outre-Mer)

NAME OF DECEASED (Last, First, Middle) Nom du décédé (Nom et prénoms)		GRADE Grade Arme	BRANCH OF SERVICE Arme	SOCIAL SECURITY NUMBER Numéro de l'Assurance Sociale
(b)(6)		CIV		(b)(6)
ORGANIZATION Organisation		NATION (e.g., United States) Pays	DATE OF BIRTH Date de naissance	SEX Sexe
Local Civ.				<input checked="" type="checkbox"/> MALE Masculin <input type="checkbox"/> FEMALE Féminin
RACE Race		MARITAL STATUS État Civil		RELIGION Culte
CAUCASOID Caucasique		SINGLE Célibataire		PROTESTANT Protestant
NEGROID Négróide		MARRIED Marié		CATHOLIC Catholique
OTHER (Specify) Autre (Spécifier)		WIDOWED Veuf		JEWISH Juif
OTHER (Specify) Autre (Spécifier)		SEPARATED Séparé		
NAME OF NEXT OF KIN Nom du plus proche parent		RELATIONSHIP TO DECEASED Parenté du décédé avec le susdit		
STREET ADDRESS Domicilié à (Rue)		CITY OF TOWN AND STATE (Include ZIP Code) Ville (Code postal compris)		

**MEDICAL STATEMENT** Déclaration médicale

CAUSE OF DEATH (Enter only one cause per line) Cause du décès (N'indiquer qu'une cause par ligne)		INTERVAL BETWEEN ONSET AND DEATH Intervalle entre l'attaque et le décès
DISEASE OR CONDITION DIRECTLY LEADING TO DEATH <sup>1</sup> Maladie ou condition directement responsable de la mort.		90 min
ANTECEDENT CAUSES Symptômes précurseurs de la mort.	MORBID CONDITION, IF ANY, LEADING TO PRIMARY CAUSE Condition morbide, s'il y a lieu, menant à la cause primaire	
	UNDERLYING CAUSE, IF ANY, GIVING RISE TO PRIMARY CAUSE Raison fondamentale, s'il y a lieu, ayant suscité la cause primaire	
OTHER SIGNIFICANT CONDITIONS <sup>2</sup> Autres conditions significatives <sup>2</sup>		

MODE OF DEATH Condition de décès	AUTOPSY PERFORMED Autopsie effectuée <input type="checkbox"/> YES Oui <input type="checkbox"/> NO Non	CIRCUMSTANCES SURROUNDING DEATH DUE TO EXTERNAL CAUSES Circonstances de la mort suscitées par des causes extérieures
NATURAL Mort naturelle	MAJOR FINDINGS OF AUTOPSY Conclusions principales de l'autopsie	
ACCIDENT Mort accidentelle		
SUICIDE Suicide	NAME OF PATHOLOGIST Nom du pathologiste	
HOMICIDE Homicide	SIGNATURE Signature	DATE Date
		AVIATION ACCIDENT Accident à Avion <input type="checkbox"/> YES Oui <input type="checkbox"/> NO Non

DATE OF DEATH (Hour, day, month, year) Date de décès (l'heure, le jour, le mois, l'année)	PLACE OF DEATH Lieu de décès
0940 02 AUG 05	228 <sup>th</sup> CSF, Mosul, IRAQ

I HAVE VIEWED THE REMAINS OF THE DECEASED AND DEATH OCCURRED AT THE TIME INDICATED AND FROM THE CAUSES AS STATED ABOVE.  
J'ai examiné les restes mortels du défunt et je conclus que le décès est survenu à l'heure indiquée et à la suite des causes énumérées ci dessus

NAME OF MEDICAL OFFICER Nom du médecin militaire ou du médecin sanitaire	TITLE OR DEGREE Titre ou diplôme
(b)(3), (b)(6)	MD
GRADE Grade	INSTALLATION OR ADDRESS Installation ou adresse
06	228 <sup>th</sup> CSF
DATE Date	SIGNATURE Signature
02 AUG 2005	(b)(3), (b)(6)

<sup>1</sup> State disease, injury or complication which caused death, but not mode of dying such as heart failure, etc.  
<sup>2</sup> State conditions contributing to the death, but not related to the disease or condition causing death.  
<sup>1</sup> Préciser la nature de la maladie, de la blessure ou de la complication qui a contribué à la mort, mais non la manière de mourir, telle qu'un arrêt du coeur, etc.  
<sup>2</sup> Préciser la condition qui a contribué à la mort, mais n'ayant aucun rapport avec la maladie ou à la condition qui a provoqué la mort.

007858

**HOSPITAL REPORT OF DEATH**

NAME AND LOCATION HOSPITAL

FOR USE OF THIS FORM, SEE AR 40400; THE PROPONENT AGENCY IS OFFICE OF THE SURGEON GENERAL

Instructions - Medical Officer in attendance will:

Prepare, in one copy only, items 1 through 10 and sign item 11.  
Print or type entries.

Send form, without delay to the Registrar or Administrative Officer of the Day, for necessary action and for preparation of required number of copies.

**SECTION A - ATTENDING MEDICAL OFFICER'S REPORT**

**PERSONAL DATA**

1. PATIENT DATA (Patient's ward plate will be used to imprint identifying data if available)

2. TIME OF DEATH (Hour-day-month-year)

3. MEDICAL EXAMINER/  
CORONER'S CASE

0940 02 AUG 2005

YES  NO

4. RELIGION

5. CHAPLAIN NOTIFIED  
 YES  NO

6. NAME, ADDRESS AND RELATIONSHIP OF RELATIVE OR FRIEND PRESENT AT DEATH

(b)(6)

Patient's name (Last, first, middle initial) Grade, Social Security Account No., Register Number and Ward Number

**CAUSE OF DEATH**

**APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH**

7a. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH (This does not mean the mode of dying, e.g., heart failure, asthenia, etc. It means the disease, injury, or complication which caused death)

DUE TO (or as a consequence of)

Gunshot wound to abdomen

90 min

7b. ANTECEDENT CAUSES (Morbid conditions, if any, giving rise to the above cause, stating the underlying condition last)

DUE TO (or as a consequence of)

(1)

(2)

8. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH, BUT NOT RELATED TO THE DISEASE OR CONDITION CAUSING IT

a.

b.

9. DATE

10. TYPED OR PRINTED NAME AND GRADE OF MEDICAL OFFICER

11.

IN ATTENDANCE

02 AUG 2005

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

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

**SECTION B - ADMINISTRATIVE ACTION**

TYPE OF ACTION	HOUR	DAY	MONTH	YEAR	INITIALS OF RESPONSIBLE OFFICER
12. TELEGRAM TO NEXT OF KIN OR OTHER AUTHORIZED PERSON					
13. POST ADJUTANT GENERAL NOTIFIED					
14. IMMEDIATE CO OF DECEASED NOTIFIED					
15. INFORMATION OFFICE NOTIFIED					
16. POST MORTUARY OFFICER NOTIFIED					
17. RED CROSS NOTIFIED					
18. OTHER (Specify)					
19.					

**SECTION C - RECORD OF AUTOPSY**

20. AUTOPSY PERFORMED (If yes, give date and place) <input type="checkbox"/> YES <input type="checkbox"/> NO		21. AUTOPSY ORDERED BY (Signature)	
22. PROVISIONAL PATHOLOGICAL FINDINGS			
23. DATE	24. TYPED NAME AND GRADE OF PHYSICIAN PERFORMING	FORMING AUTOPSY	
02 AUG 05	(b)(3), (b)(6)	(b)(3), (b)(6)	
26. DATE	27. TYPED NAME AND GRADE OF REGISTRAR	28. SIGNATURE OF REGISTRAR	

**JOINT THEATER TRAUMA RECORD**

ARRIVAL STATUS	TRIAGE CATEGORY	CHIEF COMPLAINT	
Date: <b>2 Aug 05</b>	<input type="checkbox"/> Immediate <input type="checkbox"/> Delayed <input type="checkbox"/> Minimal <input type="checkbox"/> Expectant	<b>GSW @ abd.</b>	
Time of Injury:		PATIENT CATEGORY	
Time of Arrival	AGE/GENDER: _____ Age: _____ <input type="checkbox"/> Male <input type="checkbox"/> Female	NATION	SERVICE
Transport Time:		<input type="checkbox"/> US <input type="checkbox"/> Host Nation <input type="checkbox"/> Coalition: _____ <input type="checkbox"/> Enemy	<input type="checkbox"/> USA <input type="checkbox"/> USN <input type="checkbox"/> USAF <input type="checkbox"/> USMC <input type="checkbox"/> SOF <input type="checkbox"/> Civilian <input type="checkbox"/> Combatant <input type="checkbox"/> Contractor <input type="checkbox"/> Non-gov't Org <input type="checkbox"/> Other: _____

MODE OF ARRIVAL	EXPOSURE ON ARRIVAL	WOUNDED BY	PROTECTIVE EQUIPMENT			
<input type="checkbox"/> Walked <input type="checkbox"/> Carried <input type="checkbox"/> Ground Amb. <input type="checkbox"/> Non-med Ground <input type="checkbox"/> Air Ambulance <input type="checkbox"/> Non-med Air <input type="checkbox"/> Ship Evacuation <input type="checkbox"/> Other: _____	<input type="checkbox"/> Cloths Removed <input type="checkbox"/> Blankets <input type="checkbox"/> Cooling Blanket <input type="checkbox"/> Bair Hugger <input type="checkbox"/> Radiant Heat <input type="checkbox"/> IV Fluid Warmer <input type="checkbox"/> Space Blanket <input type="checkbox"/> Hypothermia Bag <input type="checkbox"/> Other: _____	<input type="checkbox"/> Unknown <input type="checkbox"/> Enemy <input type="checkbox"/> Friendly <input type="checkbox"/> Civilian (Host) <input type="checkbox"/> Training <input type="checkbox"/> Self Accident <input type="checkbox"/> Self Inflicted <input type="checkbox"/> Sports Injury <input type="checkbox"/> Other: _____	<input type="checkbox"/> Unknown Helmet: Kev / ACH Flack Ceramic Plate Eye Protection Deltoid/Axilla Groin/Leg	Worn      Struck      Penetrated Y   N <input type="checkbox"/> <input type="checkbox"/> Y   N <input type="checkbox"/> <input type="checkbox"/>		
<b>PRE-FACILITY CARE LEVEL</b> <input type="checkbox"/> Field <input type="checkbox"/> I    BAS <input type="checkbox"/> II   FST    C- Med <input type="checkbox"/> III   CSH    EMDG			<b>MECHANISM OF INJURY (All That Apply)</b> <input type="checkbox"/> GSW- Single <input type="checkbox"/> Blast- Type, <input type="checkbox"/> Blunt- MVC <input type="checkbox"/> GSW- Multiple <input type="checkbox"/> RPG <input type="checkbox"/> Blunt- Fall <input type="checkbox"/> Frag- Single <input type="checkbox"/> IED <input type="checkbox"/> Blunt- Crush <input type="checkbox"/> Frag- Multiple <input type="checkbox"/> Mortar <input type="checkbox"/> Blunt- Other <input type="checkbox"/> Laceration <input type="checkbox"/> Grenade <input type="checkbox"/> Stab Wound <input type="checkbox"/> Mine <input type="checkbox"/> NBC <input type="checkbox"/> Burn <input type="checkbox"/> UXO <input type="checkbox"/> Electrical <input type="checkbox"/> Other <input type="checkbox"/> Other <input type="checkbox"/> Drowning			

MTF Transferred From: \_\_\_\_\_

**PRIMARY SURVEY**

**INITIAL VITAL SIGNS**

BP: \_\_\_\_\_ HR: \_\_\_\_\_ RR: \_\_\_\_\_ SaO2: \_\_\_\_\_ Temp: \_\_\_\_\_

CPR in Progress:  Y  N  
 Start: \_\_\_\_\_ Stop: \_\_\_\_\_  
 ROSC? Y   N   Time: \_\_\_\_\_

AIRWAY	<input type="checkbox"/> Drooling <input type="checkbox"/> BVM <input type="checkbox"/> Other: _____ <input type="checkbox"/> Patent <input type="checkbox"/> Stridor <input type="checkbox"/> Combi-tube <input type="checkbox"/> Talking <input type="checkbox"/> Oral/Nasal <input type="checkbox"/> Surgical <input type="checkbox"/> Obstructed <input type="checkbox"/> Intubated (Pre-Hosp): Size _____ Conf: Y N	BREATHING	Breath Sounds Right      Left <input type="checkbox"/> Unlabored <input type="checkbox"/> Clear <input type="checkbox"/> Flail Chest: Yes R L <input type="checkbox"/> Labored <input type="checkbox"/> Rales <input type="checkbox"/> Trachea: <input type="checkbox"/> Midline <input type="checkbox"/> Retraction <input type="checkbox"/> Wheeze <input type="checkbox"/> <input type="checkbox"/> Deviated <input type="checkbox"/> Agonal <input type="checkbox"/> Absent <input type="checkbox"/> Chest Symmetry: (circle one) <input type="checkbox"/> Absent <input type="checkbox"/> Absent <input type="checkbox"/> Left > Equal < Right	CIRCULATION	Tourniquet (Pre Hospital): Yes No Skin Color: _____ <input type="checkbox"/> Pale <input type="checkbox"/> Pink <input type="checkbox"/> Cyanotic Hemorrhage: Yes No Site: _____ RUE    RLE    LUE    LLE Time On: _____	OXYGENATION/INTUBATION DATA	O2 Given: NC   NRB   BVM   Other LPM: _____ Intubated: Y   N   Size: _____ Chest Tube (Pre-Hospital) <input type="checkbox"/> Right    Output: _____ ml Airleak: Y    N <input type="checkbox"/> Left      Output: _____ ml Airleak: Y    N
--------	---	-----------	---	-------------	--	-----------------------------	--

DEFICIT (AVPU)	<input type="checkbox"/> Alert <input type="checkbox"/> Verbal <input type="checkbox"/> Painful Stim. <input type="checkbox"/> Unresponsive C-Spine Immob: Yes No Backboard: Yes No	(GCS)	Eyes: _____ / 4    Verbal: _____ / 5    Motor: _____ / 6 Total: _____ / 15
Name: _____ SSN: _____ (b)(6) DOB: _____ Iraqi Civilian	Trauma Team Leader: _____ Nurse Name: _____ Nurse Signature: _____		

Pre Hospital IV Access: Type: PIV      Central      Interosseous

**007860**

SECONDARY SURVEY	ALLERGIES
<div style="display: flex; justify-content: space-around;"> <span>R</span> <span>L</span> <span>L</span> <span>R</span> </div> <div style="display: flex; justify-content: space-around; align-items: center;"> </div> <p>(AB)rasion (AMP)utation (AV)ulsion (BL)eeding (B)urn (C)repitus (D)eformity (CON) Contusion (DG)Degloving (E)cchymosis (FX)Fracture (F)oreign Body (GSW)Gun Shot (H)ematoma (LAC)eration (PW)Puncture Wound (P)ain</p>	<input type="checkbox"/> Unknown <input type="checkbox"/> NKDA <input type="checkbox"/> PCN <input type="checkbox"/> Other: _____ <hr/> <b>PAST MEDICAL HX</b> <input type="checkbox"/> Unknown <input type="checkbox"/> None <input type="checkbox"/> Cardiac Hx <input type="checkbox"/> Other: _____ <hr/> <b>CURRENT MEDS</b> <input type="checkbox"/> Unknown <input type="checkbox"/> None <input type="checkbox"/> Other: _____ <hr/> <b>PRE HOSPITAL</b> <input type="checkbox"/> Morphine: _____ mg <input type="checkbox"/> Versed: _____ mg <input type="checkbox"/> Antibiotic: _____ <input type="checkbox"/> Other: _____

**SECONDARY SURVEY**

HEAD/NECK/EENT	HEART/CARDIAC	ABDOMEN/GU/PELVIS	EXTREMITY/BACK														
<b>PUPILS</b> R= _____ mm L= _____ mm <input type="checkbox"/> Brisk <input type="checkbox"/> Brisk <input type="checkbox"/> Sluggish <input type="checkbox"/> Sluggish <input type="checkbox"/> NR <input type="checkbox"/> NR Tympanic Membranes <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Clear <input type="checkbox"/> Clear  <input type="checkbox"/> Blood <input type="checkbox"/> Blood  <input type="checkbox"/> Perf <input type="checkbox"/> Perf            Maxillo-Facial Injury  <input type="checkbox"/> Yes <input type="checkbox"/> No            C-Spine Tender  <input type="checkbox"/> Yes <input type="checkbox"/> No            CSF Drainage  <input type="checkbox"/> Yes <input type="checkbox"/> No         </div> <div style="width: 45%;"> <b>HEART SOUNDS:</b>  <input type="checkbox"/> Clear <input type="checkbox"/> Muffled <input type="checkbox"/> Absent  <b>RHYTHM:</b>  <input type="checkbox"/> s. brady <input type="checkbox"/> s. tachy <input type="checkbox"/> V tach  <input type="checkbox"/> PEA <input type="checkbox"/> asystole <input type="checkbox"/> V Fib  <input type="checkbox"/> Other: _____  <b>JUGULAR VENUS DISTENSION</b>  <input type="checkbox"/> YES <input type="checkbox"/> NO  <div style="text-align: center;">   <b>S Strong</b>  <b>P Palpable</b>  <b>D Doppler</b>  <b>A Absent</b> </div> </div> </div>	<b>EXAM:</b> <input type="checkbox"/> Non-Tender <input type="checkbox"/> Tender <input type="checkbox"/> Non-Distended <input type="checkbox"/> Distended <input type="checkbox"/> Obese <input type="checkbox"/> Rigid <input type="checkbox"/> Evisceration <input type="checkbox"/> Rebound <input type="checkbox"/> Open Wound <input type="checkbox"/> Guarding Pelvis Stable: <input type="checkbox"/> Yes <input type="checkbox"/> No Pelvic Binder Placed: <input type="checkbox"/> Yes <input type="checkbox"/> No Blood at Meatus or Vagina: <input type="checkbox"/> Yes <input type="checkbox"/> No Prostate Exam: <input type="checkbox"/> Normal <input type="checkbox"/> Abnormal Rectal Exam: <input type="checkbox"/> Normal <input type="checkbox"/> Gross Blood	<b>Fracture/Dislocation/Deformity:</b> <input type="checkbox"/> RUE <input type="checkbox"/> LUE <input type="checkbox"/> RLE <input type="checkbox"/> LLE <b>Motor and Sensory Exam:</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Motor</th> <th>Sensory</th> </tr> </thead> <tbody> <tr> <td>RUE</td> <td>+ - + -</td> <td></td> </tr> <tr> <td>LUE</td> <td>+ - + -</td> <td></td> </tr> <tr> <td>RLE</td> <td>+ - + -</td> <td></td> </tr> <tr> <td>LLE</td> <td>+ - + -</td> <td></td> </tr> </tbody> </table> Logroll Time: _____ Back Exam: <input type="checkbox"/> Normal <input type="checkbox"/> Abnormal: _____ <input type="checkbox"/> Decreased Tone		Motor	Sensory	RUE	+ - + -		LUE	+ - + -		RLE	+ - + -		LLE	+ - + -	
	Motor	Sensory															
RUE	+ - + -																
LUE	+ - + -																
RLE	+ - + -																
LLE	+ - + -																

IV ACCESS OBTAINED			FAST Exam: <input type="checkbox"/> Not Done <input type="checkbox"/> Positive <input type="checkbox"/> Negative	
Time	Gauge	Location	PROCEDURES DONE	
			TIME:	PROCEDURE
				Trauma Labs Type + Cross
				Thoracotomy: R L Clamshell
				Foley Cath: Clear Bloody None
				A-Line: Y N Location:
				NGT/OGT Aspirate: Y N Type:
				Chest Tube Left: Output: ml
				Chest Tube Right: Output: ml
				Splint:
				FAST Exam: POS NEG
				OTHER:

<b>X-RAYS DONE</b> CXR: _____ Pelvis: _____ C-Spine: _____ RUE: _____ LUE: _____ RLE: _____ LLE: _____ <b>PATIENT</b> Name: Iraqi Civilian SSN: _____	007861 Nurse Name: _____ 1191
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MEDICAL RECORD

PROGRESS NOTES

DATE	NOTES
	To OR @ 0810 hrs
02 Aug 05	(b)(6) brought directly from trauma bay to OR
Anesthesia	pt Alert somewhat combative. No TV access unable
Op Note	to obtain B/P or pulse or after several attempts - wear
Initial VS	Fem / Radial pulses. - TV access obtained pt induced
B/P 40/20	Etomidate & Succinylcholine DL Fi #3 (b)(3), (b)(6) 810 ETT
HR 120	grade I view (P) BBS but ↓ on @ side. - R Fem condyles
sat - 96%	(P) Radial A-line - surgery began - (P) ETT condyles
	pt maintained Etomidate x3 + Vecuronium x3
	B/P maintained with Belmont Infusors x3, Levophed
	intermittent bolus - Labs x4 sent (see chart)
	# PH PCO <sub>2</sub> PO <sub>2</sub> BE Hgb
#1	7.08 30 275 -23 5.6
#2	6.89 32 250 -27 6.0
#3	7.19 38 227 -13 Not Reported.
#4	7.14 37 221 -16 - obtained <sup>3.7</sup> p efforts stopped
	Fluid to fets - Meds:
	LR - 34,000 NaHCO <sub>3</sub> - 16 amps
	PRBC - 28 units CaCl - 3 amps
	Hespan - 1000 Scopalamine - x3
	0920 after team discussion - lead surgeon terminates
	resuscitation efforts pt pronounced @ 0940 hrs

RELATIONSHIP TO SPONSOR	SPONSOR'S NAME			SPONSOR'S ID NUMBER (SSN or Other)
	LAST	FIRST	MI	(b)(3), (b)(6) MMA CRNA
DEPART./SERVICE	HOSPITAL OR MEDICAL FACILITY		RECORDS MAINTAINED AT	
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.

(b)(6)

PROGRESS NOTES  
Medical Record

MEDICAL RECORD

OPERATION REPORT

PREOPERATIVE DIAGNOSIS

GSW to (R) UPPER QUADRANT

SURGEON (b)(3), (b)(6)	FIRST ASSISTANT (b)(3), (b)(6)	SECOND ASSISTANT
ANESTHETIST	ANESTHETIC	TIME BEGAN: TIME ENDED:
CIRCULATING NURSE	SCRUB NURSE	TIME OPERATION BEGAN TIME OPERATION COMPLETED

OPERATIVE DIAGNOSES  
 1) (R) diaphragm injury  
 2) major hepatic injury, (R) intraparenchymal hepatic artery injury  
 3) colon injuries - multiple  
 4) SB injuries - multiple  
 5) stomach injury, multiple  
 6) hepatic art injury

DRAINS (Kind and number) ①	SPONGE COUNT VERIFIED
-------------------------------	-----------------------

MATERIAL FORWARDED TO LABORATORY FOR EXAMINATION

OPERATION PERFORMED

Ex Lap - control of bleeding, partial hepatectomy, hemigastroectomy

DESCRIPTION OF OPERATION (Type(s) of suture used, gross findings, etc.)	PROSTHETIC DEVICES (Lot no.)	DATE OF OPERATION
---	------------------------------	-------------------

- 1) Placement of central lines - initial BP 40/20 P=126
  - 2) Ex lap & above findings
  - 3) Distal hemigastroectomy & stapler
  - 4) Mobilize liver - control bleeders, Pringle maneuver
  - 5) Expose suprahepatic vena cava - oversew (R) hepatic vein injury
  - 6) multiple bleeding sites in liver parenchyma → (R) hepatectomy
  - 7) multiple bowel injuries noted
  - 8) unable to control bleeding to keep up & resuscitation
  - 9) Time of death 0940  
 Fluids - 34L  
 PRBCs - 28 units  
 HCO<sub>3</sub> - 16 amps  
 Catt - 3 amps
- ABG - 6.89/32.9/250/-27

(b)(3), (b)(6)	DATE 2 AUG 05
entries give: Name - last, first, or medical facility	REGISTER/I.D. NO. WARD NO.

(b)(6)

(b)(6)

Iraqi Civilian

OPERATION REPORT  
Medical Record

LAST, FI  
Physician  
(b)(6)  
Iraqi Civilian

SSN  
DOB  
RANK  
UNIT  
Specimen Date and Time: 8/4/05 09:10  
Reported by: (b)(3), (b)(6)  
Date and Time: 21 Aug 09:20

Chemistry (Piccolo Analyzer) Hematology

4+ 7+ 8+ GLU CREA			Chem 12 MetLyte8 Liver			CBC Malaria H/H					
X	TEST	RESULT	REF. RANGE	X	TEST	RESULT	REF. RANGE	X	TEST	RESULT	REF. RANGE
	Na	138	128-145 mmol/L		ALB		3.3-5.5 g/dL		WBC		4.8-10.8 x10(3)/uL
	K	5.2	3.3-4.7 mmol/L		ALP		53-128 U/L		RBC		4.2-6.1 x10(6)/uL
	Cl		98-108 mmol/L		ALT		10-47 U/L		Hgb		12.0-18.0 g/dL
	pH	7.195	7.35-7.45		AMY		14-97 U/L		Hct		35.0-60.0%
	PCO2	38.9	35-45 mmHg		AST		11-38 U/L		MCV		80.0-99.0 fl
	PO2	227	80-90 mmHg		Tbil		0.2-1.6 mg/dL		MCH		27.0-31.0 pg
	TCO2	16	18-33 mmol/L		BUN		7-22 mg/dL		MCHC		33.0-37.0 g/dL
	HCO3	15.0	22-28 mmol/L		Ca		8.0-10.3 mg/dL		Plt		130-400 x10(3)/uL
	sO2	100	95-99%		Chol		100-200 mg/dL		LY%		15.0-50.0%
	BEecf	-13	(-2) - (+3)		CK		30-190 U/L		LY#		0.7-4.3 x10(3)/uL
	AGap		8-16 mmol/L		CL		98-108 mmol/L		Differential		
	iCa	0.98	0.11-1.23 mmol/L		TCO2		18-33 mmol/L		Segs		Mono
	BUN		7-22 mg/dL		Creat		0.6-1.2 mg/dL		Bands		Eos
	Glu		73-118 mg/dL		GGT		5-65 U/L		Lymph		Baso
	Creat		0.6-1.2 mg/dL		Glu		73-118 mg/dL		Atyp Ly		Immature cells
	Hct		35.0-60.0%		K		3.3-4.7 mmol/L		RBC Morphology:		
	Hgb		12.0-18.0 g/dL		TProtein		6.4-8.1 g/dL		Plt verify:		
	Lac		0.90-1.70 mmol/L		Na		128-145 mmol/L				

Urinalysis			Misc. Chemistry			Malaria Smear		
Color		Straw/Yellow	Mono		Negative	Thin/Thick		No Plasmodium Seen
Clarity		Clear	RPR		Non-Reactive	Sed Rate		
Glucose		Negative	HIV		Negative	Sed Rate		1hr = 0-20 mm
Bilirubin		Negative	DOA		Negative	Coagulation		
Ketone		Negative	Alcohol		Negative	PT		8-14 seconds
SG		1.010-1.030				APTT		21-42 seconds
Blood		Negative				FDP		Negative
pH		5.0-8.0				D-Dimer		Negative
Protein		Negative	Lipid Profile			HCG		
Urobili		Negative	CHOL		100-200 mg/dL	Urine		Negative
Nitrite		Negative	HDL		>40 mg/dL	Serum		Negative
Leuko		Negative	TRIG		0-150 mg/dL	Microbiology		
			LDL		0-150 mg/dL	KOH		No Fungal Elements

Urine Microscopic			Quantitative Cardiac Enzymes			Microbiology		
WBC		Epi	CK-MB		1.0-4.3 ng/mL	OccBld		Negative
RBC		Mucus	Myoglobin		5-107 ng/mL	Strep A		Negative
Bacteria		Yeast	Troponin I		<0.05 ng/mL	Chlamydia		Negative
Casts:		Spermatozoa				H. Pylori		Negative
Crystals:		Amorph Sed				Gram Stain		Negative
Other:						Leish. V.		Negative

AS6 / ~~6~~ ± Hemoglobin

228TH Combat Support Hospital  
Mosul, Iraq

Laboratory Results Form  
(Subject to Privacy Act of 1974)

LAST, FIF	SSN	DOB	RANK	UNIT
Physician	Specimen Date and Time:	Rept	Date and Time:	
Iraqi Civilian		(b)(3), (b)(6)	7 Aug 08	

Chemistry (Piccolo Analyzer)						Hematology					
4+	7+	8+	GLU	CREA	Am 12	MetLyte8	Liver	CBC	Malaria	H/H	
X	TEST	RESULT	REF. RANGE	X	TEST	RESULT	REF. RANGE	X	TEST	RESULT	REF. RANGE
	Na	136	128-145 mmol/L		ALB		3.3-5.5 g/dL		WBC	4.9	4.8-10.8 x10(3)/uL
	K	6.9	3.3-4.7 mmol/L		ALP		53-128 U/L		RBC	2.08	4.2-6.1 x10(6)/uL
	Cl		98-108 mmol/L		ALT		10-47 U/L		Hgb	6.0	12.0-18.0 g/dL
	pH	6.896	7.35-7.45		AMY		14-97 U/L		Hct	18.7	35.0-60.0%
	PCO2	32.9	35-45 mmHg		AST		11-38 U/L		MCV	89.9	80.0-99.0 fl
	PO2	250	80-90 mmHg		Tbil		0.2-1.6 mg/dL		MCH	28.8	27.0-31.0 pg
	TCO2	7	18-33 mmol/L		BUN		7-22 mg/dL		MCHC	32.0	33.0-37.0 g/dL
	HCO3	6.4	22-28 mmol/L		Ca		8.0-10.3 mg/dL		Plt	14	130-400 x10(3)/uL
	sO2	99	95-99%		Chol		100-200 mg/dL		LY%	23.4	15.0-50.0%
	BEecf	-27	(-2) - (+3)		CK		30-190 U/L		LY#	1.1	0.7-4.3 x10(3)/uL
	AGap		8-16 mmol/L		CL		98-108 mmol/L		Differential		
	iCa	0.86	0.11-1.23 mmol/L		TCO2		18-33 mmol/L		Segs		Mono
	BUN		7-22 mg/dL		Creat		0.6-1.2 mg/dL		Bands		Eos
	Glu		73-118 mg/dL		GGT		5-65 U/L		Lymph		Baso
	Creat		0.6-1.2 mg/dL		Glu		73-118 mg/dL		Atyp Ly		Immature cells
	Hct		35.0-60.0%		K		3.3-4.7 mmol/L		RBC Morphology:		
	Hgb		12.0-18.0 g/dL		TProtein		6.4-8.1 g/dL		Plt verify:		
	Lac		0.90-1.70 mmol/L		Na		128-145 mmol/L				

Urinalysis			Misc. Chemistry			Malaria Smear		
Color		Straw/Yellow	Mono		Negative	Thin/Thick		No Plasmodium Seen
Clarity		Clear	RPR		Non-Reactive	Sed Rate		
Glucose		Negative	HIV		Negative	Sed Rate		1hr = 0-20 mm
Bilirubin		Negative	DOA		Negative	Coagulation		
Ketone		Negative	Alcohol		Negative	PT		(b)(3), (b)(6) seconds
SG		1.010-1.030				APTT		(b)(3), (b)(6) seconds
Blood		Negative	Lipid Profile			FDP		Negative
pH		5.0-8.0	CHOL		100-200 mg/dL	D-Dimer		Negative
Protein		Negative	HDL		>40 mg/dL	HGG		
Urobili		Negative	TRIG		0-150 mg/dL	Urine		Negative
Nitrite		Negative	LDL		0-150 mg/dL	Serum		Negative
Leuko		Negative	Quantitative Cardiac Enzymes			Microbiology		
Urine Microscopic			CK-MB		1.0-4.3 ng/mL	KOH		No Fungal Elements
WBC		Epi	Myoglobin		5-107 ng/mL	OccBld		Negative
RBC		Mucus	Troponin I		<0.05 ng/mL	Strep A		Negative
Bacteria		Yeast				Chlamydia		Negative
Casts:		Spermatozoa				H. Pylori		Negative
Crystals:		Amorph Sed				Gram Stain		Negative
Other:						Leish. V.		Negative
Other:								

ABC, CBC

228TH Combat Support Hospital  
Mosul, Iraq

LABORATORY RESULTS FORM  
(Subject to Privacy Act of 1974)

LAST, FIRST, MI	SSN	DOB	RANK	UNIT
Physician: (b)(6)	Specimen Date and Time: 3/2/05 0840	Report (b)(3), (b)(6)	Date and Time: 2 Aug 0846	

CI	MetLyte8	Liver	Hematology		
4+	7+		CBC	Malaria	H/H

X	TEST	RESULT	REF. RANGE	X	TEST	RESULT	REF. RANGE
	Na	145	128-145 mmol/L		ALB		3.3-5.5 g/dL
	K	4.9	3.3-4.7 mmol/L		ALP		53-128 U/L
	Cl		98-108 mmol/L		ALT		10-47 U/L
	pH	7.008*	7.35-7.45		AMY		14-97 U/L
	PCO2	30.8	35-45 mmHg		AST		11-38 U/L
	PO2	275	80-90 mmHg		Tbil		0.2-1.6 mg/dL
	TCO2	9	18-33 mmol/L		BUN		7-22 mg/dL
	HCO3	27	22-28 mmol/L		Ca		8.0-10.3 mg/dL
	sO2	100	95-99%		Chol		100-200 mg/dL
	BEecf	-23	(-2) - (+3)		CK		30-190 U/L
	AGap		8-16 mmol/L		CL		98-108 mmol/L
	iCa	0.93	0.11-1.23 mmol/L		TCO2		18-33 mmol/L
	BUN		7-22 mg/dL		Creat		0.6-1.2 mg/dL
	Glu		73-118 mg/dL		GGT		5-65 U/L
	Creat		0.6-1.2 mg/dL		Glu		73-118 mg/dL
	Hct		35.0-60.0%		K		3.3-4.7 mmol/L
	Hgb		12.0-18.0 g/dL		TProtein		6.4-8.1 g/dL
	Lac	8.54	0.90-1.70 mmol/L		Na		128-145 mmol/L

Urinalysis		Misc. Chemistry		Malaria Smear	
Color	Straw/Yellow	Mono	Negative	Thin/Thick	No Plasmodium Seen
Clarity	Clear	RPR	Non-Reactive	Sed Rate	
Glucose	Negative	HIV	Negative	Sed Rate	1hr = 0-20 mm
Bilirubin	Negative	DOA	Negative	Coagulation	
Ketone	Negative	Alcohol	Negative	PT	8-14 seconds
SG	1.010-1.030			APTT	21-42 seconds
Blood	Negative			FDP	Negative
pH	5.0-8.0			D-Dimer	Negative

Lipid Profile		HCG	
Protein	Negative	CHOL	100-200 mg/dL
Urobili	Negative	HDL	>40 mg/dL
Nitrite	Negative	TRIG	0-150 mg/dL
Leuko	Negative	LDL	0-150 mg/dL
		Urine	Negative
		Serum	Negative

Urine Microscopic		Quantitative Cardiac Enzymes		Microbiology	
WBC	Epi	CK-MB	1.0-4.3 ng/mL	KOH	No Fungal Elements
RBC	Mucus	Myoglobin	5-107 ng/mL	OccBld	Negative
Bacteria	Yeast	Troponin I	<0.05 ng/mL	Strep A	Negative
Casts:	Spermatozoa			Chlamydia	Negative
Crystals:	Amorph Sed			H. Pylori	Negative
Other:				Gram Stain	Negative
Other:				Leish. V.	Negative

CBC/ABG/Lactate/Coags

09/19

#4

LAST, FIRST,

(b)(6)

SSN

DOB

RANK

UNIT

Physician:

Iraqi Civilian

Specimen Date and Time:

Report

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

Date and Time:

2 Aug 09 11

Ch

Chemistry (Piccolo Analyzer)

Hematology

4+			7+			8+			GLU			CREA			Chem 12			MetLyte8			Liver			CBC			Malaria			H/H			
X	TEST	RESULT	REF. RANGE	X	TEST	RESULT	REF. RANGE	X	TEST	RESULT	REF. RANGE	X	TEST	RESULT	REF. RANGE	X	TEST	RESULT	REF. RANGE	X	TEST	RESULT	REF. RANGE	X	TEST	RESULT	REF. RANGE						
	Na	138	128-145 mmol/L		ALB		3.3-5.5 g/dL		WBC	7.1	4.8-10.8 x10(3)/uL																						
	K	5.4	3.3-4.7 mmol/L		ALP		53-128 U/L		RBC	1.23	4.2-6.1 x10(6)/uL																						
	Cl		98-108 mmol/L		ALT		10-47 U/L		Hgb	3.7	12.0-18.0 g/dL																						
	pH	7.144	7.35-7.45		AMY		14-97 U/L		Hct	11.4	35.0-60.0%																						
	PCO2	37.1	35-45 mmHg		AST		11-38 U/L		MCV	92.6	80.0-99.0 fl																						
	PO2	221	80-90 mmHg		Tbil		0.2-1.6 mg/dL		MCH	30.1	27.0-31.0 pg																						
	TCO2	14	18-33 mmol/L		BUN		7-22 mg/dL		MCHC	32.5	33.0-37.0 g/dL																						
	HCO3	12.8	22-28 mmol/L		Ca		8.0-10.3 mg/dL		Plt	26	130-400 x10(3)/uL																						
	sO2	100	95-99%		Chol		100-200 mg/dL		LY%	23.4	15.0-50.0%																						
	BEecf	-16	(-2) - (+3)		CK		30-190 U/L		LY#	0.5	0.7-4.3 x10(3)/uL																						
	AGap		8-16 mmol/L		CL		98-108 mmol/L		Differential																								
	iCa		0.11-1.23 mmol/L		TCO2		18-33 mmol/L		Segs		Mono																						
	BUN		7-22 mg/dL		Creat		0.6-1.2 mg/dL		Bands		Eos																						
	Glu		73-118 mg/dL		GGT		5-65 U/L		Lymph		Baso																						
	Creat		0.6-1.2 mg/dL		Glu		73-118 mg/dL		Atyp Ly		Immature cells																						
	Hct		35.0-60.0%		K		3.3-4.7 mmol/L		RBC Morphology:																								
	Hgb		12.0-18.0 g/dL		TProtein		6.4-8.1 g/dL		Plt verify:																								
	Lac		0.90-1.70 mmol/L		Na		128-145 mmol/L																										

Urinalysis			Misc. Chemistry			Malaria Smear		
Color		Straw/Yellow	Mono		Negative	Thin/Thick		No Plasmodium Seen
Clarity		Clear	RPR		Non-Reactive	Sed Rate		
Glucose		Negative	HIV		Negative	Sed Rate		1hr = 0-20 mm
Bilirubin		Negative	DOA		Negative	Coagulation		
Ketone		Negative	Alcohol		Negative	PT		8-14 seconds
SG		1.010-1.030				APTT		21-42 seconds
Blood		Negative				FDP		Negative
pH		5.0-8.0	Lipid Profile			D-Dimer		Negative
Protein		Negative	CHOL		100-200 mg/dL	HCG		
Urobili		Negative	HDL		>40 mg/dL	Urine		Negative
Nitrite		Negative	TRIG		0-150 mg/dL	Serum		Negative
Leuko		Negative	LDL		0-150 mg/dL	Microbiology		

Urine Microscopic			Quantitative Cardiac Enzymes			KOH		
WBC		Epi	CK-MB		1.0-4.3 ng/mL	OccBld		Negative
RBC		Mucus	Myoglobin		5-107 ng/mL	Strep A		Negative
Bacteria		Yeast	Troponin I		<0.05 ng/mL	Chlamydia		Negative
Casts:		Spermatozoa				H. Pylori		Negative
Crystals:		Amorph Sed				Gram Stain		Negative
Other:						Leish. V.		Negative

ABG, CBC

**EXHIBIT F- OTHER DOCUMENTS NOT ENTERED  
AS EVIDENCE (BOLO LIST, DTU, SIGACTS)**

Pages 51 through 57 redacted for the following reasons:

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Non Responsive, (b)(2)High

Non Responsive; isolated hostile incidents, (b)(2)High

Non Responsive; isolated hostile incidents, (b)(2)High, (b)(6)

Non Responsive; isolated hostile incidents, (b)(2)High

4040 020750AUG ESCALATION  
OF FORCE

194th MP 194 MP reported while stopped in traffic  
223) a vehicle approached patrol at a hi  
Unit conducted escalation of force and fi  
(M249) at the vehicle resulting in 1x LN  
abdomen) evacuated to CSH. 1237 hrs

Non Responsive; isolated hostile incidents, (b)(2)High, (b)(6)

007877

Non Responsive; isolated hostile incidents, (b)(2)High

~~SECRET~~  
UNCLASSIFIED

Pages 60 through 62 redacted for the following reasons:

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Non Responsive; isolated hostile incidents, (b)(2)High