

**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 Social Security Number (SSN).

**PRINCIPAL PURPOSE:** To document potential criminal activity involving the U.S. Army, and to allow Army officials to maintain discipline, law and order through investigation of complaints and incidents.

**ROUTINE USES:** Information provided may be further disclosed to federal, state, local, and foreign government law enforcement agencies, prosecutors, courts, child protective services, victims, witnesses, the Department of Veterans Affairs, and the Office of Personnel Management. Information provided may be used for determinations regarding judicial or non-judicial punishment, other administrative disciplinary actions, security clearances, recruitment, retention, placement, and other personnel actions.

**DISCLOSURE:** Disclosure of your SSN and other information is voluntary.

1. LOCATION COP KEATING	2. DATE (YYYYMMDD) 2009/10/03	3. TIME	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME (b)(3), (b)(6)	6. SSN (b)(6)	7. GRADE/STATUS	
8. ORGANIZATION OR ADDRESS B TRP 3-61 CAV			

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

On October 3, 2009 I witness the following Soldiers action first hand while under heavy enemy fire. I witness each of these individuals run Ammo to the Gun Trucks; I also witness them help pick up the wounded in litter teams; I also witness them each engaging the enemy while pulling security at the ECP tower, the Shura building, and the ASP fighting position. At the end of the day each and everyone help with combating the firer that was consuming all the building on the COP.

Sgt  
Sgt  
Sgt  
Spc  
Spc  
Spc  
(b)(3), (b)(6)

\*\*\*\*\*NOTHING TO FOLLOW\*\*\*\*\*

10. EXHIBIT	11. INITIALS OF STATEMENT (b)(3), (b)(6)	PAGE 1 OF <u>1</u> PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF \_\_\_\_\_ 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 SSG (b)(3), (b)(6) TAKEN AT FOB Bostick DATED 15 OCT 2009

9. STATEMENT (Continued)

*[The main body of the statement is crossed out with a large handwritten 'X']*

**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 \_\_\_\_\_. 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 THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE,

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

**WITNESSES:**

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

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

ADDRESS

\_\_\_\_\_

ORGANIZATION OR ADDRESS

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 15<sup>th</sup> day of October, 2009 at FOB Bostick Afghanistan

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

(Signature of Person Administering Oath)

ILT  
(Typ)

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

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

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

PAGE OF PAGES