

SIR 05 APR [REDACTED]

1. Category [REDACTED]

2. Type of Incident: Forced Cell Extraction of Detainee

3. Date/Time of Incident: 1540 07April05

4. Location: Camp Delta, GTMO, Cuba

5. Other information:

(a) Racial (Y/N): N

(b) Trainee Involvement (Y/N): N

6. Personnel involved:

A. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

B. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
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Duty of Status: On Duty

C. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
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- (i)
- (j)

D. Subject:

- (a)
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E. Subject:

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F. Subject:

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G. Subject:

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H. Subject:

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(j)

I. Subject:

(a)  
(b)  
(c)  
(d)

# SWORN STATEMENT

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

## PRIVACY ACT STATEMENT

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

1. LOCATION CAMP DELTA [REDACTED] Black	2. DATE (YYYYMMDD) 2005 04 07	3. TIME 1540	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	

8. ORGANIZATION OR ADDRESS

9. I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH: (7 APRIL 2005) AT 1540 A Force Cell Extraction move was Performed on [REDACTED] Detainee ISN [REDACTED] I [REDACTED] ON THE FORCE CELL EXTRAC TEAM. [REDACTED] THE TEAM AP THE Cell and entered, THE Detainee put up a Fight. [REDACTED] USING + minimum amount of Force Necessary. THE TEAM moved the Detainee From his Cell to the REC YARD. MEDICAL and behavior Health did an Assessment on the Detainee, then the team moved the detainee back to his Cell. THE TEAM Release the Detainee and exited using the minimum amount of Force Necessary. Detainee and the Force cell extraction team Needed No medical Attention. III END OF STATEMENT

No Further

es this Page.

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PA
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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

IRF CHECK LIST AND VIDEO INFORMATION FOR PL/SOG

"I AM THE [REDACTED] FOR CAMP [REDACTED] TODAY'S DATE IS 7 APR 05, AND THE CURRENT TIME IS 1517. I / THE CO HAVE / HAS AUTHORIZED AN IRF ON THE DETAINEE IN CELL # [REDACTED] SN: [REDACTED] DUE TO THE FOLLOWING EVENTS:

DETAINEE REFUSED TO REMOVE TOWEL  
FROM WINDOW

I WILL USE THE MINIMUM AMOUNT OF FORCE NECESSARY AND ENSURE THAT THE IRF TEAM DOES AS WELL."

- ☐ ESCORT TEAM
- ☐ MEDICAL TEAM
- ☐ VIDEO TEAM
- ☐ INTERPRATER
- ☐ BARBER

IRF PERSONNEL INFORMATION:

POSITION 1	POSITION 2	POSITION 3	POSITION 4	POSITION 5

[REDACTED]

MEDICAL ATTENTION NEEDED: ~~YES~~ NO

INCIDENT REPORT SIR 05 APR [REDACTED]

1. Category: [REDACTED]
2. Type of Incident: Forced Cell Extraction of Detainee
3. Date/Time of Incident: 122007April05
4. Location: Camp Delta, GTMO, Cuba
5. Other information:
- (a) Racial (Y/N): N
  - (b) Trainee Involvement (Y/N): N

6. Personnel involved:

A. Subject:

- (a)
- (b)
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B. Subject:

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C. Subject:

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D. Subject:

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E. Subject:

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F. Subject:

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G. Subject:

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H. Subject:

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I. Subject:

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J. Subject:

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K. Subject:

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L. Detainee:

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7. Summary of Incident: On 07 April 2005 at approximately 0840hrs, detainee ISN# [REDACTED] refused shower and recreation. He was ordered to come out for a cell search and placed his hands out in order to be shackled. When the Block MP began to place the shackles on the detainee, the detainee punched the Block MP in the stomach and spit on him. Per SOP, Behavioral Health was called and they arrived on the block with an interpreter to remove his Basic Issue (BI). When ordered to surrender his BI, the detainee threw urine on the Behavioral Health technician and the interpreter. The Camp [REDACTED] SOG then responded to the block and ordered the detainee to give up his BI. Again, he refused. The Camp [REDACTED] PL then attempted to get the detainee's basic issue items. The detainee stated that he would give up his issue items to the Behavioral Health officer if they came down and told him to give the items to the MP's. The Behavioral Health officer did not respond to the block. The on-duty Company Commander arrived on the block at approximately 1215hrs. When the CO went on the tier, the bean hole to [REDACTED] was open as the detainee would assault anyone who went to try and close it. The CO instructed one of the block MP's to retrieve an IRF shield to be used to close the bean hole. As the MP's moved to close the bean hole, the detainee threw feces through the bean hole,

which struck the on duty CO on the wrist, and legs. The MP's placed the IRF shield over the bean hole and were able to secure it shut. The CO then asked the detainee to comply with turning over his BI and was told no. At 1220 hrs, the CO then called the assistant S-3, then the on-duty field grade, and informed him of the situation. He then authorized the Forced Cell Extraction (FCE) and the primary IRF code was given. At 1234hrs, the IRF team entered the cell and conducted the Forced Cell Extraction. The detainee was shackled and taken to the recreation yard for examination by the on duty Corpsman. The detainee was asked if he was injured and he stated he was okay and uninjured. He was then carried by the IRF team to [REDACTED] block and placed into cell [REDACTED] without incident and the FCE was complete at 1245hrs. The detainee was fed his lunch meal at approximately 1300hrs.

8. Remarks: See medical information in summary of incident

9. Publicity: N/A

10. Commander Reporting: [REDACTED]

11. Point of Contact: [REDACTED]

12. Downgrading Instructions: N/A



# SWORN STATEMENT

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**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing and processing of your statement.  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION CAMP DELTA	2. DATE (YYYYMMDD) 2005 0407	3. TIME 0850	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	

8. ORGANIZATION OR ADDRESS  
JDDO JTF

\_\_\_\_\_, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH

On 07 APR 05, at approximately 0840 while attempting to shackle \_\_\_\_\_ the detainee spit on me in the stomach and spit on me. // End of Statement  
CONTINUED - This occurred while conducting a room cell search. /// End of Statement ///

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 1

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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1. LOCATION CAMP DELT GTMO CUBA	2. DATE (YYYYMMDD) 2005/04/07	3. TIME 1302	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	
8. ORGANIZATION OR ADDRESS JTF-GTMO CUBA			

\_\_\_\_\_, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

AT AROUND 0800, \_\_\_\_\_ ASSAULTED AND SPIT ON \_\_\_\_\_  
PRESENCE WAS REQUESTED ON \_\_\_\_\_ BLOCK. I TALKED WITH \_\_\_\_\_ AB  
WHAT HAD HAPPENED. \_\_\_\_\_ STATED HE WASN'T TREATED WELL, THAT ~~HE~~ HE  
WAS SWORE AT AND MAD AT \_\_\_\_\_ FOR A PRIOR EVENT THAT  
"SUPPOSEDLY" HAD HAPPENED. BEHAVIORAL HEALTH CAME ON \_\_\_\_\_ BLOCK AFTER  
I HAD EXITED THE BLOCK. MY PRESENCE AS SOG WAS REQUESTED ON \_\_\_\_\_ BLOCK  
AGAIN ON \_\_\_\_\_ BLOCK. THE PERSON THAT CAME ON \_\_\_\_\_ BLOCK  
FROM BEHAVIORAL HEALTH RECEIVED A LARGE AMOUNT OF URINE IN THE  
FACE AND UPPER TORSO. \_\_\_\_\_ CAME ON \_\_\_\_\_ BLOCK AND ALSO  
RECEIVED URINE AND FESUS. /// END OF STATEMENT ///

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 2 PAG

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**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing and retr  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION CAMP DELAGUENTANA MOREY, CUBA	2. DATE (YYYYMM) [REDACTED] 2008/04/07	3. TIME [REDACTED] 1302	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	

8. ORGANIZATION OR ADDRESS

TTE-GTMO, GUANTANAMO BAY, CUBA

9. [REDACTED] . WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

ON 2008 APRIL 07 AT 1230 WHILE ATTEMPTING TO CLOSE [REDACTED] DETAINEE WAS PUNCHING AT MYSELF AND OTHER MPs. ALSO BEFORE THE BEI HOLE WAS SHOT [REDACTED] THREW A COMBINATION OF FICES AND URIN OUT LAND ON SEVEREL PEOPLE, [REDACTED]

/// END OF STATEMENT ///

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 2 PAG

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IRF CHECK LIST AND VIDEO INFORMATION FOR PL/SOG

"I AM THE [REDACTED] FOR CAMP [REDACTED] TODAYS DATE IS 7 APR 05 AND THE CURRENT  
TIME IS \_\_\_\_\_. I / THE CO HAVE / HAS AUTHORIZED AN IRF ON THE DETAINEE  
IN CELL # [REDACTED] ISN: [REDACTED] DUE TO THE FOLLOWING EVENTS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I WILL USE THE MINIMUM AMOUNT OF FORCE NECESSARY AND ENSURE THAT  
THE IRF TEAM DOES AS WELL."

- ☐ ESCORT TEAM
- ☐ MEDICAL TEAM
- ☐ VIDEO TEAM
- ☐ INTERPRATER
- ☐ BARBER

IRF PERSONNEL INFORMATION:

POSITION 1

POSITION 2

POSITION 3

POSITION 4

POSITION 5



[REDACTED]  
MEDICAL ATTENTION NEEDED: YES / NO

(e)  
(f)  
(g)  
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(i)  
(j)

J. Subject:

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K. Subject:

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L. Detainee:

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7. Summary of Incident: CO on duty, [REDACTED] On 07 April 2005 at approximately 1345, detainee ISN# [REDACTED] cell [REDACTED] refused an order from the Block NCO to take a towel down that was totally covering his cell window. At approximately 1350, the SOG [REDACTED] ordered detainee ISN# [REDACTED] to remove his towel and he refused. At approximately 1400, the PL [REDACTED] ordered the detainee to remove his towel and he refused. At approximately 1422, the [REDACTED] arrived at the detainee's cell with an Arabic interpreter and ordered the detainee to remove his towel because it was a safety issue and against the rules at least 3 times and he refused. At approximately 1450, [REDACTED] activated the IRF Team using the [REDACTED] and received permission from [REDACTED] to conduct a Forced Cell Extraction (FCE) if the detainee continued to refuse orders to take his towel down. At approximately 1500, a Behavioral Health Technician [REDACTED] arrived at [REDACTED] block and spoke to detainee ISN# [REDACTED]. Afterward, [REDACTED] authorized the removal of all BI items from the detainee upon extraction. At approximately 1515, [REDACTED] arrived at the detainee's cell again with the Arabic interpreter and gave him another chance to

## IRF INFORMATION COLLECTION SHEET

ISN OF DETAINEE  
CELL LOCATION

SOG  
PL  
CO

MEDICAL

BEHAVIORAL HEALTH

TIME/ WHO- ADVISED HIGHER OF SITUATION:

TIME IRF TEAM ASSEMBLED 1220

TIME IRF INITIATED

1234

TIME IRF COMPLETED

1245

CAMERA DISPATCHED W/ RADIO 1220

(JEDI 1)

STOP CAMP MOVEMENT

1222

START CAMP MOVEMENT

1259

HOLD RADIO TRAFFIC

1222

CLEAR NORMAL TRAFFIC

1259

OTHER POSSIBLE NOTIFICATIONS

TIME

DETAINEE OPERATIONS OIC

1220

S-3

1220

DJDOG

CJDOG

1223

JOC CONTACTED

1225

CELL/ISN

REASON FOR IRF

NOT COMPLETE FOR CELL SEARCH

CHEMICAL USED

NO

DECON LOCATION

INJURY MP/DETAINEE

NO

MED CLEARED

YES

NO

RELOCATION OF DETAINEE

YES



SIR 3 JUNE 2005

1. Category: [REDACTED]

2. Type of Incident: Reactive Use Of Force

3. ISN#: [REDACTED]

4. Date/Time of Incident: 3 JUNE 2005 / Appx. 0450hrs

5. Location: Camp [REDACTED] Wing, Cell [REDACTED] GTMO, Cuba

6. Other information:

(a) Racial (Y/N): N

(b) Trainee Involvement (Y/N): N

7. Personnel involved:

A. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

B. Su

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C. S

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D. S

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E. Subject:

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F. Detainee:

(a)  
(b)  
(c)

8. Summary of Incident: On 3 June 2005, at approximately 0430 hours, I SOG [REDACTED] contacted Behavioral Health in regards to a memo authorizing Camp [REDACTED] Cadre to remove detainee ISN# [REDACTED] Basic Items for an incident the detainee committed early in the shift. Behavioral Health advised me they were waiting on my call to them, saying the removal of the Basic Items was completed. At that time I advised the [REDACTED] Wing Block NCO to remove the detainee's Basic Items. The MP's shackled the detainee's hands and legs using the minimum amount force necessary. When the shackling was completed the detainee became violent and non compliant. The detainee spit on the Wing Guard's [REDACTED] face and attempted to head butt the Delta Block NCO [REDACTED]. At that time the detainee was taken to the ground using the minimum amount force necessary. The [REDACTED] Wing Block NCO sounded the [REDACTED]. All available Cadre and the SOG responded to the incident. The detainee's Basic Items were removed. The MP's then unrestrained the detainee and exited the cell in the motion's of a Forced Cell Extraction. No injuries were reported from Camp [REDACTED] cadre or the detainee at that time. DOC, Camp [REDACTED] NCOIC, Medical and Behavioral Health were notified of the incident.

9. Remarks: N/A

10. Publicity: N/A

11. Commander Reporting: [REDACTED]

12. Point of Contact: [REDACTED]

13. Downgrading Instructions: N/A



**SWORN STATEMENT**

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**PRIVACY ACT STATEMENT**

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**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION Guantanamo Bay, Cuba	2. DATE (YYYYMMDD) 2005/06/03	3. TIME 0535	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	
8. ORGANIZATION OR ADDRESS C-Btry 1/143 FA			

9. \_\_\_\_\_, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

At approximately 0450 on 03 June 2005, I \_\_\_\_\_ assisted with the removal of the Basic Issue of Detainee \_\_\_\_\_ ISN \_\_\_\_\_ per order Behavioral Health. The detainee was compliant and informed us that he wanted to be shackled and pass the items through the tray slot. After the detainee was shackled he then proceeded to spit on me in the face. Then the Detainee then became violent and tried to head butt \_\_\_\_\_. The Detainee was then secured on the ground using the minimum amount of force necessary. At the time, the Block NCO sounded the duress code and all available MP's and SOG responded. Then \_\_\_\_\_ and the Block NCO proceeded to take his Basic Issue Items while the Detainee was secure. A time the Detainee was placed in the IRF position and we exited the cell \_\_\_\_\_ — End of statement \_\_\_\_\_

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT _____	PAGE 1 OF <u>2</u> PAGE
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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.

remove the towel or else he would be extracted from his cell so the towel could be removed to which the detainee again refused. At approximately 1530, [REDACTED] gave the order for the FCE to proceed. At 1540, the IRF team entered the cell and conducted the Forced Cell Extraction. The detainee was restrained in flexi-cuffs and taken to the recreation yard for examination by the on-duty Corpsman. When asked questions about if he was injured the detainee's only responses through the interpreter were words to the effect that he was at war with all present. The Corpsman determined the detainee to be uninjured. When the detainee was told he would have to give up his shirt and pants once back in his cell, he answered angrily with further threats. For this reason, shears were used to cut and remove his shirt and pants from him while being held by the IRF Team in the recreation yard. The detainee was then carried by the IRF team back to his cell, [REDACTED] without incident and the FCE was complete at approximately 1620. The entire FCE was video-taped.

8. Remarks: See medical information in summary of incident

9. Publicity: N/A

10. Commander Reporting: [REDACTED]

11. Point of Contact: [REDACTED]

12. Downgrading Instructions: N/A

# 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 Block Camp Delta, GTMO Cuba	2. DATE (YYYYMMDD) 2005/04/07	3. TIME 1640	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	
8. ORGANIZATION OR ADDRESS 367th Military Police Company JDOG, Camp Delta, APO AE 09360			
9. [REDACTED]			

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

ON 20050407 AT APPROX 1540HRS A FCE (FORCE CELL EXTRACTION) WAS PERFORMED ON DETAINEE ISN [REDACTED] DETAINEE REFUSED SEVERAL REQUEST FROM THE BLOCK MP, BLOCK SGT, CAMI PL, AND CO TO REMOVE HIS TOWEL FROM HIS WINDOW, (IT OBSTRUCTED THE ONLY VIEW INTO THE C AFTER MULTIPLE FAILED REQUEST THE FCE TEAM ENTERED THE CELL. THE DETAINEE WAS VERY VIC AND FOUGHT THE FCE TEAM. THE DETAINEE WAS SECURED BY THE TEAM USING FLEXI-CUFFS AND M TO THE REC YARD. HE WAS CHECKED BY MEDICAL AND BEHAVIORAL HEALTH. BOTH STATED THAT I WAS IN GOOD CONDITION WITH LIMITED INJURIES. (SCRAPES ON HIS ARM). THE FCE TEAM THEN RETU THE DETAINEE TO HIS CELL AND RELEASED HIM WITHOUT FURTHER INCIDENTS. THERE WAS NO INJU TO THE TEAM MEMBERS AND THE TEAM USED THE MINIMUM AMOUNT OF FORCE THROUGH OUT THE F

NOTHING FOLLOWS

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PA
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**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 reported.  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing and processing of reports.  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION Block Camp Delta, GTMO Cuba	2. DATE (YYYYMMDD) 2005/04/07	3. TIME 1640	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME		6. SSN	7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS Navy Provisional Guard BN. Company JDOG, Camp APO AE 09360			

9. \_\_\_\_\_, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH

ON 20050407 AT APPROX 1540HRS A FCE (FORCE CELL EXTRACTION) WAS PERFORMED ON DETAINEE IS [REDACTED]. I [REDACTED] THE FCE TEAM ENTERED THE CELL. THE DETAINEE WAS VERY VIOLENT AND FOUGHT THE FCE TEAM. THE DETAINEE WAS SECURED USING FLEXI-CUFFS AND MOVED TO THE REC YARD. HE WAS CHECKED BY MEDICAL AND BEHAVIORAL HE/ BOTH STATED THAT HE WAS IN GOOD CONDITION. THE FCE TEAM RETURNED HIM TO HIS CELL AND RELEASED HIM. THERE WAS NO INJURIES TO THE FCE TEAM OR THE DETAINEE. THE TEAM USED THE MINIMUM AMOUNT OF FORCE [REDACTED] NOTHING FOLLOWS-----NOTHING FOLLOWS

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 P
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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

**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  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION	2. DATE (YYYYMMDD) 2005 04 07	3. TIME 1540	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	
8. ORGANIZATION OR ADDRESS U.S. NAVY			

, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

ON 07 APRIL 2005 at approximately 1540 HRS A Force Cell Extraction  
MOVE was performed on Detainee [REDACTED] ISN [REDACTED]  
I was the number one man on the Force Cell Extraction team.  
The team approach the Cell entered the Cell which the detainee  
put up a fight. I the number one man [REDACTED]  
using the minimum amount of force necessary. The team moved  
the detainee from the Cell to the Rec. Area. Medical and  
Behavior Health did an assessment on the detainee, the  
team moved the Detainee back into the Cell. The team  
Released the Detainee and exit the Cell using the minimum force  
necessary. Detainee and Force Cell Extraction team needed  
No medical attention. /// END STATEMENT ///

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF \_\_\_\_\_ P.

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_

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~~SECRET~~

### SWORN STATEMENT

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#### PRIVACY ACT STATEMENT

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**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION CAMP DELTA, [REDACTED] BLOCK	2. DATE (YYYY-MM-DD) 20050407	3. TIME 1606	4. FILE NUMBER
5. SSN [REDACTED]		7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS [REDACTED]			

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

ON APRIL 7, 2005 AT 1500 HOURS I ENTERED CELL [REDACTED] ON [REDACTED] AS PART OF THE F.C.E. TEAM. WHEN THE CELL DOOR WAS OPENED THE DETAINEE ATTEMPTED TO ESCAPE AND RESISTED VERY VIOLENTLY. I HAD CONTR OF THE DETAINEE'S RIGHT ARM. I SECURED HIS HANDS BY USING FLEXIC WE CARRIED THE DETAINEE INTO THE RIGHT RECREATION YARD. THE DET WAS SEEN BY MEDICAL AND BEHAVIOURAL HEALTH, AND WAS CLEARED TO BE RETURNED TO HIS CELL. HE WAS THEN CARRIED BACK TO HIS CELL. THE MINIMUM AMOUNT OF FORCE WAS USED TO SECURE THE DETAINEE. THE DETAINEE WAS NOT HURT AND I WAS NOT HURT DURING THE FORCE CELL EXTRACTION. III ————— END OF STATEMENT. —————

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 P
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_

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## 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 Block Camp Delta, GTMO Cuba	2. DATE (YYYYMMDD) 2005/04/07	3. TIME 1640	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	

8. ORGANIZATION OR ADDRESS  
Navy Provisional Guard BN, Bravo Company JDOG, Camp Delta, APO AE 09360

9. \_\_\_\_\_, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

ON 20050407 AT APPROX 1540HRS A FCE (FORCE CELL EXTRACTION) WAS PERFORMED ON DETAINEE ISN [REDACTED] I WAS THE NUMBER THREE MAN. [REDACTED] THE FC TEAM ENTERED THE CELL. THE DETAINEE WAS VERY VIOLENT AND FOUGHT THE FCE TEAM. [REDACTED] THE DETAINEE WAS SECURED USING FLEXI-CUFFS AND MOVED TO THE REC YARD. HE WAS CHECKED BY MEDICAL AND BEHAVIORAL HEALTH. BOTH STATED THAT HE WAS IN GOOD CONDITION. WE RETURNED HIM TO HIS CELL AND RELEASED HIM. THERE WAS NO INJURIES TO MYSELF OR THE DETAINEE. I USED THE MINIMUM AMOUNT OF FORCE. [REDACTED] NOTHING FOLLOWS-----

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF _____ PA
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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### PRIVACY ACT STATEMENT

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**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION Block Camp Delta, GTMO Cuba	2. DATE (YYYYMMDD) 2005/04/07	3. TIME 1640	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	

8. ORGANIZATION OR ADDRESS  
Navy Provisional Guard BN. Bravo Company JDOG, Camp Delta, APO AE 09360

9.

\_\_\_\_\_, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

ON 20050407 AT APPROX 1540HRS A FCE (FORCE CELL EXTRACTION) WAS PERFORMED ON DETAINEE ISN [REDACTED] THE FC TEAM ENTERED THE CELL. THE DETAINEE WAS VERY VIOLENT AND FOUGHT THE FCE TEAM. I SECURED THE DETAINEE WAS SECURED USING FLEXI-CUFFS AND MOVED TO THE REC YARD. I WAS CHECKED BY MEDICAL AND BEHAVIORAL HEALTH. BOTH STATED THAT HE WAS IN GOOD CONDITION. WE RETURNED HIM TO HIS CELL AND RELEASED HIM. THERE WAS NO INJURIES TO MYSELF OR THE DETAINEE. I USED THE MINIMUM AMOUNT OF FORCE. NOTHING FOLLOWS.

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PA
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_

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**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 Wing Camp Guantanamo Bay, Cuba	2. DATE (YYYYMMDD) 2005/06/03	3. TIME 0535	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	
8. ORGANIZATION OR ADDRESS C-Btry 1/143 FA			

, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

At approximately 0450 on 03 June 2005, I [REDACTED] assisted with the removal of the Basic Issue of Detainee [REDACTED] ISN [REDACTED] per order Behavioral Health. The detainee was compliant and informed us that he wanted to be shackled and pass the items through the tray slot. After the detainee was shackled he then proceeded to spit on [REDACTED] the detainee then became violent and tried to head butt me. The detainee was then secured on the ground using the minimum amount of force necessary. At the time, the Block NCO sounded the duress code and all available MP's and SOG responded. Then [REDACTED] and the Block NCO proceeded to take his Basic Issue Items while the Detainee was secure. At that time the Detainee was placed in the IRF position and we exited the cell. [REDACTED]

*End of Statement*

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	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 Camp [REDACTED] Guantanamo Bay, Cuba	2. DATE (YYYYMMDD) 2005/06/03 [REDACTED]	3. TIME 0535 [REDACTED]	4. FILE NUMBER [REDACTED]
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS 189th MP Company			

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

At approximately 0450 on 03 June 2005, I [REDACTED] assisted with the removal of the Basic Issue of Detainee [REDACTED] ISN: [REDACTED]. The detainee was compliant and informed us that he wanted to be shackled and not pass the items through tray slot. Myself and the MP's then shackled the Detainee with hand and leg irons. After the detainee was shackled he then proceeded to spit on [REDACTED] the Detainee then became violent and tried to head butt [REDACTED] s the Detainee's head, and the MP's secured the Detainee on the ground using the minimum amount of force necessary. At that time, the Block NCO sounded the distress code and all available MP's and the SOG responded. At that time the Detainee was placed in the IRF position and we exited the cell.

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGE
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF [REDACTED] TAKEN AT [REDACTED] DATED [REDACTED]  
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

**SWORN STATEMENT**

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

**PRIVACY ACT STATEMENT**

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**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION Camp [REDACTED] Guantanamo Bay, Cuba	2. DATE (YYYYMMDD) 2005/06/03 [REDACTED]	3. TIME 0519 [REDACTED]	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS C Btry, 1/143 FA			

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

At approximately 0450 on 03 June 2005, I [REDACTED] informed Detainee ISN: [REDACTED] that he was now on [REDACTED] prior incident per order Behavioral Health. The detainee was compliant and informed us that he wanted to be shackled and pass the items through the tray slot. The MP's then shackled the Detainee with hand and leg irons. After the detainee was shackled he then proceeded to spit on [REDACTED] the Detainee then became violent and tried to head butt [REDACTED]. Then I secured his head, and the MP's secured the Detainee on the ground using the minimum amount of force necessary. I and the Block NCO proceeded to take the Detainee's Basic Items Issue. At that time, the Block NCO sounded the [REDACTED] and all available MP's and the SOG responded. At that time the Detainee was placed in the IRF position and we exited the c

//END OF STATEMENT//

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGE
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TAKEN AT DATED

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# DETAINEE REPORT

A729AD2F

1. TO COMMANDER or DESIGNATED REPRESENTATIVE

2. DATE

03JUN2005 0728L

3. TYPE OF REPORT: (Check One)

SIR

4. STATUS

REFER FOR DISCIPLINARY ACTION

5. DETAINEE'S NAME: (Last, First, MI)

6. ISN#

7. DETAINEE LOCATION

8. INCIDENT

09-THROW/SPIT BODY FLUIDS ON /AT MP (BATTERY)

9. REPORT

: On 3 June 2005, at approximately 0430 hours, I SOG [REDACTED] contacted Behavioral Health in regards to a memo authorizing Camp [REDACTED] Cadre to remove detainee ISN# [REDACTED] Basic Items for an incident the detainee committed early in the shift. Behavioral Health advised me they were waiting on my call to them, saying the removal of the Basic Items was completed. At that time I advised the [REDACTED] Block NCO to remove the detainee's Basic Items. The MP's shackled the detainee's hands and legs using the minimum amount force necessary. When the shackling was completed the detainee became violent and non compliant. The detainee spit on the Wing Guard's [REDACTED] face and attempted to head butt the [REDACTED] Block NCO [REDACTED]. At that time the detainee was taken to the ground using the minimum amount force necessary. The [REDACTED] Block NCO sounded the [REDACTED] All available Cadre and the SOG responded to the incident. The detainee's Basic Items were removed. The MP's then unrestrained the detainee and exited the cell in the motion's of a Forced Cell Extraction. No injuries were reported from Camp [REDACTED] cadre or the detainee at that time. DOC, Camp [REDACTED] NCOIC, Medical and Behavioral Health were notified of the incident.

DETAINEE CURRENT LEVEL IS A [REDACTED]

LAST OFFENSE COMMITTED ON 3 JUNE 05

CATEGORY V OFFENSE

NO MOVEMENT

10. WITNESS

11 WAS DETAINEE INFORMED (Check One)

NO

12. ACTION TAKEN BY COMPOUND NCO:

13. ACTION(s) &amp; RECOMMENDATION(s) OF GUARD COMMANDER:

14. RECOMMENDATIONS BY CHIEF, DETAINEE OPERATIONS BRANCH:

15. ACTION TAKEN BY SUPERINTENDENT:

APPROVED BY [REDACTED]

16. ACTIONS

17. REPORTING PERSON

NCOIC SOG

18. PERSON SSN

19. PERSON GRADE

ALL

DMS Observation/Disciplinary Report Form

SIR 01 July 05- 02

1. Category: [REDACTED]

2. Type of Incident: Forced Cell Extraction ISN [REDACTED]

3. Date/Time of Incident: 01 July 2005 / hrs

4. Location: Camp [REDACTED] Block, GTMO, Cuba

5. Other information:

(a) Racial (Y/N): N/A

(b) Trainee Involvement (Y/N): N/A

6. Personnel involved:

A. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

B. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

C. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

D. Subject:

- (a)
- (b)
- (c)

- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

E. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

F. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

G. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

H. Detainee:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)

7. Summary of Incident: On 1 July 05 at approximately 2305 hours, detainee ISN [REDACTED] from [REDACTED] detached footpad from toilet. Detainee was instructed that he would be moved. Detainee refused to move. After numerous attempts to convince detainee to move by BNCO, SOG, PL, Camp CO, to include attempt by FGIW [REDACTED], the FCE code was given. During the one of two Korans in the cell was inadvertently damaged, and the detainee received lacerations to lip and forehead. Detainee was restrained and taken to Detention clinic for medical assessment. Detainee was returned to new cell [REDACTED]

8. Remarks: None

9. Publicity: N/A

10. Commander Reporting: [REDACTED]  
Cuba

11. Point of Contact: [REDACTED]

12. Downgrading Instructions: N/A

# 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  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION <b>CAMP DELTA, GUANTANAMO BAY, CUBA</b>	2. DATE (YYYYMMDD) <b>2005 07 02</b>	3. TIME <b>0346</b>	4. FILE NUMB
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/ST.	

8. ORGANIZATION OR ADDRESS  
**MPGB, CAMP DELTA, GUANTANAMO BAY, CUBA**

9. **[REDACTED]**, WANT TO MAKE THE FOLLOWING STATEMENT UNDER C

ON 06 JULY 2005 AT APPROXIMATELY 2115 WHILE THE IRF WAS MOVING DETAINEE  
 I **[REDACTED]**, BLOCK 11C0 DID OBSERVE THAT DETAINEE **[REDACTED]**  
 CELL **[REDACTED]** HAD REMOVED ONE FOOT PAD FROM HIS COMMODE AND WAS BEATING IT AGA  
 THE FRONT OF HIS CELL. THE DETAINEE WAS ASKED REPEATEDLY BY THE BLOCK 11C0 AND  
 CO, WITH AN ARABIC INTERPRETER PRESENT, TO RETURN THE BROKEN FOOT PAD TO THE CVA  
 TO ALLOW THE BLOCK GUARDS TO MOVE HIM TO AN UNBROKEN CELL. THE DETAINEE DID  
 COMPLY. THE IRF ARRIVED ON THE BLOCK AT 2320 AND REMOVED THE DETAINEE FROM  
 BLOCK AT 2340. **[REDACTED]**

END OF STATEMENT

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT <b>[REDACTED]</b>	PAGE 1 OF <b>2</b>
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 MUST BE BE INDICATED.



IRF CHECK LIST AND VIDEO INFORMATION FOR PL/SOG

"I AM THE [REDACTED] FOR CAMP [REDACTED] TODAY'S DATE IS 01 JUL 05, AND THE CURR  
TIME IS \_\_\_\_\_. I / THE CO HAVE / HAS AUTHORIZED AN IRF ON THE DETAIN  
IN CELL # [REDACTED] ISN: [REDACTED] DUE TO THE FOLLOWING EVENTS:

Barker FOOTPADS DID NOT WANT TO RETURN  
AND AS MURDER

I WILL USE THE MINIMUM AMOUNT OF FORCE NECESSARY AND ENSURE THA  
THE IRF TEAM DOES AS WELL."

- o ESCORT TEAM
- o MEDICAL TEAM
- o VIDEO TEAM
- o INTERPRATER
- o BARBER

*IRF TEAM*

IRF PERSONNEL INFORMATION:

POSITION 1      POSITION 2      POSITION 3      POSITION 4      POSITION

[REDACTED]

[REDACTED]

MEDICAL ATTENTION NEEDED: YES / NO

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**DISCLOSURE:** Disclosure of your social security number is voluntary.

8. ORGANIZATION OR ADDRESS  
JTF, CAMP DELTA, GUANTANAMO, BAY CUBA

... WANT TO MAKE THE FOLLOWING STATEMENT UNDER O.

ON 2005 JULY 01 AT APPROXIMATELY 2305 THE IRF CODE INITIATED AND THE SECONDARY IRF TEAM DRESSE  
I [REDACTED] [REDACTED]

RESTRAINTS. ON 2005 JULY 01 AT APPROXIMATELY 2300 THE I.  
TEAM ENTERED CELL [REDACTED] AND EXTRACTE  
DETAINEE ISN# [REDACTED] USING THE MINIMI  
AMOUNT OF FORCE NECESSARY. AFTER THE IRF WAS COME  
THE DETAINEE WAS TURNED OVER TO THE CORPSMAN. [REDACTED]  
///END OF STATEMENT///

PAGE 1 OF 2

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**SWORN STATEMENT**

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1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay, Cuba	2. DATE (YYYYMMDD) 2005 07 02	3. TIME 1400	4. FILE NUMBER
5. LAST NAME FIRST NAME MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	

8. ORGANIZATION OR ADDRESS  
JTF GWB C.F. CAMP [REDACTED], Camp Delta, Guantanamo Bay, Cuba 09360

9. I, [REDACTED] WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH: ON THE 2005 JULY 01 AT 2305 I [REDACTED] ON THE F CELL EXTRACTION TEAM WHICH EXTRACTED DETAINEE ISNT [REDACTED] 1400 CELL [REDACTED] I USED THE MINIMUM AMOUNT OF FORCE NECESSARY. END OF STATEMENT

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAG
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For use of this form, see AR 190-45; the proponent agency is ODCSOPS

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

AUTHORITY:	Title 10 USC Section 301; Title 9 USC Section 2951; E.O. 9397 dated November 22, 1965 TO SWX.
PRINCIPAL PURPOSE:	To provide commanders and law enforcement officials with means by which information may be accu
ROUTINE USES:	Your social security number is used as an additional/altearte means of identification to facilitate filing
DISCLOSURE:	Disclosure of your social security number is voluntary. <span style="float:right">23 OF 28</span>

<b>DISCLOSURE:</b>			
Disclosure of your social security number is voluntary.			
1. LOCATION [REDACTED] BLOCK [REDACTED]	2. DATE (YYYYMM) 01 JUL 05	3. TIME 1810	4. FILE NUMBER [REDACTED]
5. NAME FIRST NAME MIDDLE NAME [REDACTED]	6. SSN [REDACTED]		7. GRADE/STATUS [REDACTED]
8. ORGANIZATION OR ADDRESS [REDACTED]			

WANT TO MAKE THE FOLLOWING STATEMENT UNDER O

APPROXIMATELY 2305 THE SECONDARY IRF CODE WAS GIVEN, AT THAT TIME I STEPPED OFF OF [REDACTED] BLOCK AND PUT ON THE PROPER IR GEAR AND STOOD BY FOR THE WORD TO STEP ONTO [REDACTED] BLOCK. AT APPROXIMATELY 2330 THE WORD WAS GIVEN TO FORM UP OUTSIDE OF [REDACTED] BLOCK. SALLY DOORS WERE OPENED AND AT THAT TIME THE IRF TEAM LINED UP OUTSIDE OF [REDACTED] HOLDING DETAINEE ISAH [REDACTED] MY P [REDACTED] ON THE IRF TEAM, WHICH MEANS THAT I AM [REDACTED]

PUT INTO RESTRAINTS MY [REDACTED]  
WAS SAFE. AFTER THE DETAINEE WAS PUT INTO RESTRAINTS AND EXTRA  
FROM HIS CELL WITH THE MINIMAL AMOUNT OF FORCE NEEDED HE WAS  
TAKEN OUT INTO THE CAUSE WAS WHERE HE WAS TREATED FOR ANY  
THE MEDICAL TEAM ON SCENE DETERMINED THAT THE DETAINEE NEEDED  
FURTHER TREATMENT SO HE WAS PUT ON A SPINE BOARD AND PLACED  
ON THE [REDACTED] THE ESCORT TEAM ON SCENE ESCORTED  
MEDICAL AND THE DETAINEE. [REDACTED] — END OF STATEMENT —

10. EXHIBIT	11. INIT	NG STATEMENT	PAGE 1 OF 1
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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

# 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 accurate.  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing a  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION CAMP DELTA, GUANTANAMO BAY, CUBA	2. DATE (YYYYMMDD) 2005 07 02	3. TIME 1702	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	

8. ORGANIZATION OR ADDRESS

JTF, CAMP DELTA

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

ON 01 JUL 2005 AT APPROX 2053 [REDACTED]  
OUT IN THE [REDACTED] THE IIRF TEAM [REDACTED] AFTER MANNING UP I  
DRESSING OUT WE ARE STATED OUR POSITION AND USE OF FORCE TO LON DAT CAMERA.  
WE PROCEEDED TO [REDACTED] BLOCK AND ENTERED LCU [REDACTED] TO EXTRACT ISN [REDACTED]  
MOVE HIM TO [REDACTED] END OF STATEMENT

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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

# 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 acc  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filin  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION 2. DATE (YYYYMMDD) 3. TIME 4. FILE NUM

CAMP DELTA, GUANTANAMO BAY, CUBA

20050702

2034

5. LAST NAME, FIRST NAME, MIDDLE NAME

6. SSN

7. GRADE/ST

8. ORGANIZATION OR ADDRESS

JTF, CAMP DELTA

9.

WANT TO MAKE THE FOLLOWING STATEMENT UNDER

ON 01 JUL 2005 AT APPROX. 2315HRS THE ALTERNATE IRF TEAM WAS CALLED.

THE IRF TEAM WENT INTO CELL AND EXTRACTED DETAINEE ISN#  
USING THE MINIMUM AMOUNT OF FORCE NECESSARY,  
END OF STATEMENT

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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SIR 22 February 2004

1. Category: [REDACTED]

2. Type of Incident: Forced Cell Extraction , ISN(s) #

3. Date/Time of Incident: 221035RFEB04

4. Location: [REDACTED] Block, Camp Delta, GTMO Cuba

5. Other Information:

(a) Racial (Y/N): N

(b) Trainee Involvement (Y/N): N

6. Personnel Involved:

A. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

B. Sub

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

C. Sub

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

D. Sub

- (a)
- (b)
- (c)

- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

E. Subject

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

F. Subject

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

G. Detail

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)

*all ISN's IRF'd need to be in summary.*

7. Summary of Incident: At approximately 1035 on 22 February 2004, Detainee ISN [REDACTED] in cell [REDACTED] refused to exit his cell for a cell search. He was offered multiple chances to comply but still refused. The IRF team was called, and the detainee was forcefully removed from his cell. [REDACTED]

[REDACTED] No injuries reported.

8. Remarks: See medical information in summary of incident

9. Publicity: N/A

10. Commander Reporting: MG Miller, CJTF-GTMO, Guantanamo Bay, Cuba

11. Point of Contact: [REDACTED]



12. Downgrading Instructions: N/A

# SWORN STATEMENT

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

## PRIVACY ACT STATEMENT

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

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2004/02/22	TIME 1111	4. FILE NUMBER
5. LAST NAME FIRST NAME MIDDLE NAME	6. SSN	7. GRADE/STATUS	

8. ORGANIZATION OR ADDRESS  
 217th Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 22 February 2004 at approximately 1635 hours [redacted] SSN# [redacted] was IFFED (forcibly removed) from his cell for refusing a random cell search. I [redacted] man [redacted] using the minimum amount of force necessary. [redacted]  
 /// End of Statement ///

10. EXHIBIT	1	MAKING STATEMENT	PAGE 1 OF 2 PA
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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**PRINCIPAL PURPOSE:** To provide commanders and law enforcement officials with means by which information may be accurately  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing and  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) TIME 22 Feb 07 1156	4. FILE NUMBER
3. LAST NAME FIRST NAME MIDDLE NAME	6. SSN	7. GRADE/STATUS

8. ORGANIZATION OR ADDRESS  
217 Military Police CO, Camp Delta, Guantanamo Bay Cuba 09360

9. [REDACTED] WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

Detainee [REDACTED] ISN-[REDACTED]  
Refused Radem Cell Search at 103  
on Feb 07. Detainee was removed in  
minor amount of force needed to  
as [REDACTED]

[REDACTED] leader End of Statement -  
was moved to [REDACTED]

10. EXHIBIT

11. INITIAL [REDACTED] MAKING STATEMENT

PAGE 1 OF 2 PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_

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## 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 accurate  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing an  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 20040222	3. TIME 1148 hrs	FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	

8. ORGANIZATION OR ADDRESS  
 717 Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360

9. [REDACTED] WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 22 Feb 04 I was on Secondary IRF team for Camp Delta  
 3. I [REDACTED]  
 Minimum amount of force necessary, Detainees Refused  
 Random Cell search. Detainee [REDACTED] ISN [REDACTED]  
 Was IRF at Approx 1207 hrs, Detainee [REDACTED]  
 Cell [REDACTED] Detainee Cell [REDACTED] ISN [REDACTED]  
 At Approx 1305 hrs and moved to [REDACTED] by IRF team.  
 Detainee 027 was IRF at Approx 1041 hrs. Detainees a  
 IRF team was not hurt. // END OF STATEMENT

10. EXHIBIT	11. INITIAL [REDACTED] NG STATEMENT	PAGE 1 OF 2 P
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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# SWORN STATEMENT

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## 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 accu  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2004-02-22	3. TIME 1049	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STAT	

8. ORGANIZATION OR ADDRESS  
 Military Police *Company*, Camp Delta, Guantanamo Bay Cuba 09360

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

ON 2004 Feb 22 AT ABOUT 1035 I RECEIVED 3C711 TO GO TO [REDACTED]  
 TO SECURE DETAINEE [REDACTED] FOR REFUSING A RANDOM  
 SEARCH. DETAINEE WAS SECURED AND MOVED TO [REDACTED] I [REDACTED]  
 ON THE IRF TEAM [REDACTED]  
 THE MINIMUM AMOUNT OF FORCE NECESSARY. NO MEDICAL CARE WAS NEEDED  
 [REDACTED] END OF STATEMENT [REDACTED]

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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**PRIVACY ACT STATEMENT**

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

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2004-02-22	3. TIME 1110 hrs	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	
8. ORGANIZATION OR ADDRESS 217th Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

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


On 22 Feb 04 I was on Secondary IRF team for Camp [REDACTED] I [REDACTED] using the minimum amount of force necessary. Detainees refused Random Cell search. Detainee ISN [REDACTED] was IRF at Approx 1022 hours. Detainee ISN [REDACTED] cell [REDACTED] was IRF at 1041 hours. Detainee cell [REDACTED] ISN [REDACTED] was IRF at Approx 1035 and was moved to [REDACTED] by IRF team. Detainees and IRF team sustained no injuries. // // // // // End of statement


10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PA
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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SIR 162020RFEB04

1. Category 

Type of Incident: Forced Cell Extraction :  


3. Date/Time of Incident: 162020RFEB04

4. Location: Camp Delta, GTMO, Cuba

5. Other Information:

(a) Racial (Y/N): N

(b) Trainee Involvement (Y/N): N

6. Personnel Involved:

G. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

H. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

I. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

J. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

**Summary of Incident:** At approximately 2020hrs 16 February 2004 Block personnel approached the following detainees for the purpose of conducting a random cell search: ISN [REDACTED] the detainee refused. Block personnel informed the detainee that the random cell search was not optional; and again, the detainee refused. After the detainee refused the chain of command at Camp [REDACTED] the primary IRF team at Camp [REDACTED] was assembled, medical support was called along with video camera support, and the recreation area prepped for [REDACTED]. Once medical support and video support were present at the block, the detainee was given another opportunity to comply by [REDACTED] and refused yet again. [REDACTED] ordered the 5person IRF team to enter into the cell and forcibly removed the detainee from the cell and moved the detainee to the recreation area for [REDACTED]. Once in the recreation area, the detainee received medical attention. Once medical personnel cleared the detainee, the IRF team moved the detainee back to the cell. The cell extraction of the detainee went well. There were no injuries to any of the assigned block personnel, IRF team members or detainee.

- 8. Remarks: See medical information in summary of incident
- 9. Publicity: N/A
- 10. Commander Reporting: MG Miller, CJTF-GTMO, Guantanamo Bay, Cuba
- 11. Point of Contact: [REDACTED]
- 12. Downgrading Instructions: N/A



# SWORN STATEMENT

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

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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 acc  
 ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate fili  
 DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2004 02 16	3. TIME 2130	4. FILE NUM
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/S [REDACTED]	
8. ORGANIZATION OR ADDRESS 258 Military Police CO, Camp Delta, Guantanamo Bay Cuba 09360			

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

ON 16 FEB 2004 AT APPROXIMATELY 2020 DETAINEE [REDACTED] ISN# [REDACTED]  
 REFUSED A CELL SEARCH. I WAS CALLED FOR A FORCED CELL EXTRACTION  
 DETAINEE WAS REMOVED FROM HIS CELL ~~TO~~ TO THE REC YARD W  
 CORPSMAN CHECK THE DETAINEE OUT, ONCE THE CELL WAS SEARCHED THE  
 DETAINEE WAS RETURNED TO HIS CELL [REDACTED]

//END OF STATEMENT//

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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## PRIVACY ACT STATEMENT

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 PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurate.  
 ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and processing of your personnel file.  
 DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYY-MM-DD) 20040216	3. TIME 2130	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	
8. ORGANIZATION OR ADDRESS 258 Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH

While on the Primary Irf team on Feb 16:  
 Detainees [redacted] and [redacted] Both Refused Random C  
 Searches. I s N's [redacted]  
 my job was [redacted]

Using the minimum  
 of force necessary. Both detainees were checked  
 By medical and Clerical no injuries were sustained.  
 // End of Statement

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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

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

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2009-02-16	3. TIME 2130	4. FILE NO. [REDACTED]
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE [REDACTED]	
8. ORGANIZATION OR ADDRESS 255 Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

On 16 FEB 89, at garage 2000 hrs I responded to a force call extracts  
[redacted] block. Detainees in cell # [redacted] refused to a  
for random cell searches. Detainee in cell # [redacted] 150# [redacted]  
refused to come out. PC refused detainee to get down and  
detainee complied [redacted] we took him down &  
and he was cleared by medical. After putting the detainee back  
cell and then went to [redacted] 150# [redacted] where  
refused to come out for a random cell search. He was taken  
down and did not move [redacted] [redacted] long  
see yard where he was [redacted] [redacted] detainee  
at the detainee back in his cell [redacted] medical &  
the ca-  
THE END OF STA  
So what is this?

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 O
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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MUST BE BE INDICATED.

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 PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be  
 ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate  
 DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 20040216	3. TIME [REDACTED] 2130	4. FILE NO
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE [REDACTED]	
8. ORGANIZATION OR ADDRESS 258 Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

9. [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:  
 On 16 Feb 04, at 2000hrs the IRF word was called for detainee in cell [REDACTED] refused to come out for a random cell search. [REDACTED] was brought to medical cleared him, this cell was search & he was put back in. No IRF team were injured. We then moved to cell [REDACTED] who also refused search. [REDACTED] he was brought to the rec. yard [REDACTED] medical cleared we put him back in his cell. No IRF team members were injured. etc.  
 //End of Statement//

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 C
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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 PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be :  
 ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate :  
 DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2004 02 16	3. TIME 2130	4. FILE NO
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE	
8. ORGANIZATION OR ADDRESS Military Police , Camp Delta, Guantanamo Bay Cuba 09360			

9. , WANT TO MAKE THE FOLLOWING STATEMENT UNDER

on Feb 16 2004, 2020 hrs the Primary T R F team was call  
 and both before a search  
 minimal amount of force necessary. had no injuries sta  
 was needed. then got cleared by medical  
 we took the the rec yard for  
 he was cleared by medical with no injuries // end of

10. EXHIBIT	1. OF PERSON MAKING STATEMENT	PAGE 1 C
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"  
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 MUST BE BE INDICATED.

SIR 19 June 2005

1. Category: N/A

2. Type of Incident: Forced Cell Extraction

3. Date/Time of Incident: 1702, 19 June 2005

4. Location: [REDACTED], GTMO Cuba

5. Other Information:

(a) Racial (Y/N): N

(b) Trainee Involvement (Y/N): N

6. Personnel Involved:

A. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

B. Subj

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- (j)

C. Subj

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D. Subj

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(f)  
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(h)  
(i)  
(j)

D. Detainee:

(a)  
(b)  
(c)  
(d)

7. Summary of Incident: On 19 June 2005, at approximately 1702 hours, [REDACTED] Camp Commanding Officer, with permission from [REDACTED] acting Field Grade in the Wire ordered Camp [REDACTED] Platoon Leader, [REDACTED] to initiate a Forced Cell Extraction on ISN# [REDACTED]. The detainee grabbed a guard and took his whistle while continuously refusing to relinquish food items from previous meal. The detainee was subdued by the IRF team, put on a backboard and moved to [REDACTED] Block, cell [REDACTED].

8. Remarks: N/A

9. Publicity: N/A

10. Commander Reporting: [REDACTED]

11. Point of Contact [REDACTED]

12. Downgrading Instructions: N/A

IRF CHECK LIST AND VIDEO INFORMATION FOR PL/SOG

"I AM THE [REDACTED] FOR CAMP [REDACTED] TODAYS DATE IS 11/30/02 AND THE CURRENT TIME IS 1702. I / THE CO HAVE / HAS AUTHORIZED AN IRF ON THE DETAINEE IN CELL # 8, ISN: 074630 DUE TO THE FOLLOWING EVENTS:

GRABBED MPS WHISTLE

THREW AN APPLE & FLIP FLOP AT BCK NCO

I WILL USE THE MINIMUM AMOUNT OF FORCE NECESSARY AND ENSURE THAT THE IRF TEAM DOES AS WELL."

- ☒ ESCORT TEAM
- ☒ MEDICAL TEAM
- ☒ VIDEO TEAM
- ☒ INTERPRATER
- ☒ BARBER

IRF PERSONNEL INFORMATION:

POSITION 1      POSITION 2      POSITION 3      POSITION 4      POSITION 5

MEDICAL ATTENTION NEEDED: YES NO



# 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 accurate.  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing.  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION [REDACTED] BLOCK / CAMP [REDACTED]	2. DATE (YYYYMMDD) 20050619 [REDACTED]	3. TIME 1845 [REDACTED]	4. FILE NUMBER [REDACTED]
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]		6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]
8. ORGANIZATION OR ADDRESS NAVY PROVISIONAL GUARD BATTALION / PLATOON 4 / CAMP [REDACTED]			

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

ON 17 JUNE 2005 AT 1700Z THE SECONDARY CODE [REDACTED] WAS CALLED AND THE IRF TEAM WAS ACTIVATED. WE WENT UP AND WENT INTO [REDACTED] BLOCK TO CELL [REDACTED] ISN# [REDACTED]. THE TEAM ENTERED THE CELL. [REDACTED] WAS EXTREMELY COMBATIVE. I USED THE MINIMUM AMOUNT OF FORCE NECESSARY AND SECURED THE CELL. AFTER THE DETAINEE WAS SECURED, WE MANEUVERED HIM ONTO THE DECK AND TOOK HIM OUT TO THE DECK AND PUT HIM ON A SPINE BOARD. HE WAS COMBATIVE AND WAS SPITTING ON MEDICAL STAFF AS WE SECURED HIM. [REDACTED] AND WAS TRANSPORTED TO [REDACTED] BLOCK AND PUT ON THE SPINE BOARD. [REDACTED] WE EXTRACTED AND SECURED THE DETAINEE IN THE CELL. [REDACTED]

-----//NOT USED//-----

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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

# SWORN STATEMENT

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**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION BLOCK	2. DATE (YYYYMMDD) 20050619	3. TIME 1820	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STA	

## 8. ORGANIZATION OR ADDRESS

CAMP DEITA, GUANTANAMO BAY CUBA

\_\_\_\_\_, WANT TO MAKE THE FOLLOWING STATEMENT UNDER O.

ON JUNE 19 2005 AT ABOUT 1700 THE \_\_\_\_\_  
 AT THAT TIME THE TEAM GOT TOGETHER  
 AT THE \_\_\_\_\_ MARCHED IN TO \_\_\_\_\_ BLOCK TO 1FF \_\_\_\_\_ ISN#  
 THE DETAINEE WAS COMBATIVE AND JUMPING AROUND  
 THE CELL, ME BEING \_\_\_\_\_  
 BUT THE CELL WAS SLIPPERY WITH WHAT APPEARED TO  
 TOOTH PASTE AND WATER, WHEN WE WENT IN THE DETAINEE JUMPED  
 ON TO HIS DUNK AND SINCE I SLIPPED, HE GOT A HOLD OF MY HEAD  
 AND STARTED TO SCRATCH MY FACE AND POKE MY EYES, AFTER THAT  
 WENT TO CHOKING ME AT WHICH POINT HIS FINGER WENT IN MY MOUTH  
 SINCE I HAD A HOLD OF HIS RIGHT LEG I COULD NOT DO ANYTHING TO  
 HIM FROM CHOKING ME BUT TO BITE HIS FINGERS, AFTER HE RELEASED  
 ME I WENT TO SECURE HIS ARM AND WITH THE MINIMUM AMOUNT OF  
 FORCE NECESSARY, I GAVE THE PLEXI CUFFS TO \_\_\_\_\_ AND HE PUT  
 THEM ON THE DETAINEE, AFTER WE SECURED HIM, WE PUT THEM IN THE  
 STRETCHER, SECURED HIM AND TOOK HIM OUT AND \_\_\_\_\_  
 WE TOOK HIM TO CAMP \_\_\_\_\_ TO \_\_\_\_\_ BLOCK CELL \_\_\_\_\_ WE PUT HIM IN AND  
 HIM WHEN HE WAS SECURED WE TOOK THE PLEXI CUFF FROM HIS LEGS AND SO  
 HIM AND PROCEEDED TO TAKE THE RESTRAINTS ON HIS HANDS, AFTER THAT WE  
 PROCEEDED TO GET OUT OF THE CELL, AFTER EVERYTHING WAS SECURED THAT WE

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_

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**SWORN STATEMENT**

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**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 [REDACTED] Block, Camp Delta, Guantanamo Bay, Cuba	2. DATE (YYYYMMDD) 26 SEP 01 1702	3. TIME 1702	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS CAMP [REDACTED] BLOCK [REDACTED] Camp Delta, Guantanamo Bay, Cuba 09360			
9.			

, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

ON 14 SEP 2005, AT APPROXIMATELY 1702, CAMP 213 SECONDARY IRF TEAM CON  
A FORCE CELL ENTRATION ON [REDACTED] BLOCK, CELL [REDACTED] ISN# [REDACTED]  
FOR FAILURE TO COMPLY TO BEHAVIORAL HEALTH'S INSTRUCTION TO MOVE TO  
BLOCK. [REDACTED] HAD SMEARED TOOTH PASTE ON THE CELL FLOOR PRIOR TO THE  
TEAM ENTERING THE CELL. THE SECONDARY IRF TEAM ENTERED [REDACTED] CELL  
AND SECURED DETAINEE [REDACTED] WITH THE LEAST AMOUNT OF FORCE NECESSARY.  
DETAINEE [REDACTED] WAS BROUGHT BY THE SECONDARY IRF TO THE CAUSWAY  
AND SECURED TO A GURNIEY AND ASSESSED BY MEDICAL. MEDICAL ANNOUNCED  
NO INJURIES TO THE DETAINEE OR IRF TEAM. [REDACTED] WAS ESCORTED  
[REDACTED] BLOCK. MVA (// END OF STATEMENT //)

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2
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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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**PRINCIPAL PURPOSE:** To provide commanders and law enforcement officials with means by which information may be accur  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION	2. DATE (YYYYMMDD) 20050619	3. TIME 1806	4. FILE NUMBER
5. LAST NAME FIRST NAME MIDDLE NAME	6. SSN	7. GRADE/STA	
8. ORGANIZATION OR ADDRESS			

\_\_\_\_\_, WANT TO MAKE THE FOLLOWING STATEMENT UNDER O

On 19 June 05 at about 1702 \_\_\_\_\_ was called. I proceeded to causeway to dressout as NCOIC. The team proceeded to \_\_\_\_\_ block Camp \_\_\_\_\_ to \_\_\_\_\_ ISN# \_\_\_\_\_. After a quick so-  
 Check by the \_\_\_\_\_, we entered the cell and used the minimal amount of force necessary to secure \_\_\_\_\_. As we secured \_\_\_\_\_ he got \_\_\_\_\_ helmet off and  
 at his face drawing blood. WE secured \_\_\_\_\_ and proceeded to move \_\_\_\_\_ to \_\_\_\_\_.  
 \_\_\_\_\_ was spitting on the entire team, PL and CO. \_\_\_\_\_ was cleared by corpman  
 FCE Team was cleared by corpman. The team escorted \_\_\_\_\_ from camp \_\_\_\_\_.  
 WE placed \_\_\_\_\_ in \_\_\_\_\_ cut off the restraints and extracted the  
 from cell. \_\_\_\_\_ // End of statement //

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT _____	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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**PRINCIPAL PURPOSE:** To provide commanders and law enforcement officials with means by which information may be accurately reported.  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing.  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION	2. DATE (YYYYMMDD)	3. TIME	4. FILE NUMBER
	2005 06 19	1800	
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	

8. ORGANIZATION OR ADDRESS  
 4th PARADELON, CAMP DELTA, GUANTANAMO BAY, CUBA

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

ON OR ABOUT 2005 SON 19 AT APPROXIMATELY 1700, [REDACTED] SIGNALING THE  
 OF THE ALTERNATE FCE TEAM. AFTER A QUICK SAFETY CHECK OF THE GEAR  
 BEGAN TO DAWN MY GEAR. ONCE MYSELF AND THE REST OF THE ALT  
 FCE TEAM WAS GEARED UP WE WERE BRIEFED ON A DETAINEE IN  
 [REDACTED] ISN# [REDACTED] I WAS IDENTIFIED [REDACTED]  
 AND [REDACTED]  
 [REDACTED] WITH THE MINIMUM AMOUNT  
 OF FORCE NECESSARY. AT THIS TIME MYSELF AND THE ALTERNATE  
 FCE TEAM ENTERED [REDACTED] AND SECURED THE DETAINEE USING THE  
 MINIMUM AMOUNT OF FORCE NECESSARY. AT THIS TIME THE DET  
 HAND AND LEG WERE SECURED USING FLEXIY CUFFS. WE THEN RE  
 THE DETAINEE FROM [REDACTED] TO TRANSFER HIM TO [REDACTED] AS WE W  
 CARRYING THE DETAINEE OUT OF THE CELL HE BEGAN SPITTING AT  
 PERSONS STANDING IN THE YARD. AT THIS TIME I BEGAN USING  
 PRESSURE POINTS ON THE DETAINEE'S NECK AND JUGULAR MARCH. APP  
 4 TIMES ON THE WAY TO [REDACTED] BLOCK [REDACTED] HAD TO REPEAT THIS DUE  
 THE DETAINEE CONTINUING TO SPIT AND TRYING TO BREAK FREE. ONCE  
 ARRIVED AT [REDACTED] BLOCK WE PUT THE DETAINEE IN [REDACTED] UNSECU  
 HIS HANDS AND LEGS AND REMOVED ALL MEMBERS OF THE TEAM  
 WITHOUT INCIDENT.

END OF STATEMENT -

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF 1
	[REDACTED]	

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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SIR 29FEB04-DO2

1. Category: N/A

2. Type of Incident: Forced Cell Entry

3. Detainee ISN: [REDACTED]

4. Date/Time of Incident: 29 Feb 04/0937hrs

5. Location: Camp Delta, GTMO, Cuba

6. Other information:

(a) Racial (Y/N): N

(b) Trainee Involvement (Y/N): N

7. Personnel involved:

A. Subject:

(a)  
(b)  
(c)  
(d)  
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(g)  
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7. Summary of Incident: On 29 Feb 04, at approx. 0937hrs, detainee [REDACTED] refused to shackle up for a random cell search. The IRF Team was activated and they extracted him from his cell using the minimum amount of force necessary. [REDACTED] checked by Medical and returned to cell. [REDACTED]

8. Remarks: See medical information in summary of incident

9. Publicity: N/A

10. Commander Reporting: MG Miller, CJTF-GTMO, Guantanamo Bay, Cuba

11. Point of Contact: [REDACTED]

12. Downgrading Instructions: N/A

# 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 an  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2004 02 29	3. TIME 1035	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS 463rd Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

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

On 29 FEBRUARY, 2004 at approximately 0937 IRT team responded to [REDACTED] block [REDACTED], ISN# [REDACTED] had refused a random cell search. The PL [REDACTED] and the team was given permission to enter. My job [REDACTED] and use the minimum amount of force necessary. Detainee was removed - placed in the rec area to be evaluated by medical upon completion of the medical ter evaluation the detainee was cleared and placed back into his cell. [REDACTED]

/// END OF STATEMENT ///

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2004 02 29	3. TIME 1035	4. FILE NUMBER [REDACTED]
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	

8. ORGANIZATION OR ADDRESS  
 463rd Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On 29 Feb 04 at 0937, I [REDACTED] on the IRF team. My job was  
 [REDACTED] on detainee [REDACTED] ISN [REDACTED]  
 [REDACTED] was a cell search refusal. [REDACTED] was lying down on his front side  
 entry. I used the least amount of force necessary to secure his right leg. [REDACTED]  
 was secured then taken to the rec yard, [REDACTED] and cleared by me.  
 Then detainee was brought back to cell. [REDACTED]

End of Statement

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing an  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMM) 20040229	3. TIME 1035	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS 403rd Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

9. [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH  
 On 29 Feb 04 at about 0937 while conducting my duties [REDACTED]  
 [REDACTED] the IRF team [REDACTED]  
 using the minium amount of force necessary. I entered  
 ISN# [REDACTED] with the IRF team because [REDACTED] re-  
 a random cell search. We took [REDACTED] out of his cell and  
 moved him to the recyard for [REDACTED] and then  
 back to his cell using the minium amount of force nec  
 /// End of Statment ///

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"  
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**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing and  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (Y [REDACTED] M [REDACTED] D) 20040331	3. TIME 1052	4. FILE NUMBER
5. LAST NAME FIRST NAME MIDDLE NAME		6. SSN	7. GRADE/STATUS

8. ORGANIZATION OR ADDRESS  
 463rd Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360

9. [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:  
 On 29 Feb 04 At Apprx. 0937 The IRF Team entered the cell of [REDACTED] The IRF Team was used because detainee [REDACTED] Refused a Random Cell search [REDACTED] pri-  
 US Arriving on [REDACTED] Block [REDACTED] on the IRF team [REDACTED]  
 [REDACTED] of the detainee and to ensure the IRF Team  
 A whole uses the least amount of force necessary to safely perform the extraction. The Det  
 was secured and moved to the rec yards where he was [REDACTED] cleared by medical  
 The detainee was then moved back to his cell without further incident. [REDACTED]  
 ///END OF STATEMENT ///

10. EXHIBIT	11. INITIAL [REDACTED] MAKING STATEMENT	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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

**SWORN STATEMENT**

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**PRIVACY ACT STATEMENT**

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**PRINCIPAL PURPOSE:** To provide commanders and law enforcement officials with means by which information may be accurate  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing and  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2004 02 29	3. TIME 11:30	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS 463 Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

[REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:  
 ON 29 FEB 04 AT APPROXIMATELY 09:37 WHILE [REDACTED] ONE  
 IRT TEAM, [REDACTED] EXTRA  
 [REDACTED] ISN [REDACTED]. The Detainee resisted get  
 his hands cuffed by not moving his arms. Detainee was removed from C  
 USING THE MINIMUM AMOUNT OF FORCE NECESSARY NEARBY, AND PLACED IN THE  
 YARD [REDACTED] AND THEN RETURNED TO HIS CELL /// END OF STATEMENT

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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SIR 191428RFEB04

1. Category: N/A

2. Type of incident: Forced Cell Extraction

3. Detainee ISN: [REDACTED]

4. Date/Time of incident: 191420RFEB04

5. Location: Camp Delta, GTMO, Cuba

6. Other information

a. Racial (Y/N): N

7. Personnel Involved:

A. Subject

a.  
b.  
c.  
d.  
e.  
f.  
g.  
h.  
e.

B. Subject

a.  
b.  
c.  
d.  
e.  
f.  
g.  
h.  
i.

C. Subject

a.  
b.  
c.  
d.  
e.  
f.  
g.  
h.  
i.

D. Subject

- a.
- b.
- c.
- d.
- e.
- f.
- g.
- h.
- i.

E. Subject

- a.
- b.
- c.
- d.
- e.
- f.
- g.
- h.
- i.

F. Subject

- a.
- b.
- c.
- d.
- e.
- f.
- g.
- h.
- i.

G. Detail

- a.
- b.
- c.
- d.
- e.
- f.

8. Summary of Incident: On 19 February 2004, at approximately 1428hrs, Detainee ISN [REDACTED] refused to comply with the requirement to submit to a random cell search. The IRF Team was activated and they extracted the Detainee from the cell using the minimum amount of force necessary and checked the cell for contraband and unauthorized items.

9. Remarks: See medical information in summary of incident

10. Publicity: N/A

11. Commander Reporting: BG Hood, CJTF-GTMO, Guantanamor Bay, Cuba

12. Point of Contact:  
3239

13. Downgrading instructions: N/A

# SWORN STATEMENT

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

## PRIVACY ACT STATEMENT

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

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2004 02 19	3. TIME 1740	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS 258 Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

9. [REDACTED] WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

19 FEB 04 at approx 1428hrs detainee in cell [REDACTED] C15N [REDACTED] SC  
to come out for a random cell search. The alternate IIRF team was called  
we responded to [REDACTED] block. Once the team was ready we re-where brief  
by PL2 on [REDACTED] situation. Once stacked in front of his cell I observed  
PL2 telling the detainee to get on the ground. The detainee refuse  
comply. [REDACTED] and then we entered the cell and secured the  
detainee. Once secured we then proceeded to the causeway with the a  
where he was [REDACTED] cleared by medical. Once [REDACTED] we put  
detainee back in his cell. We then proceeded to the causeway [REDACTED]

---//END OF STATEMENT//---  
[REDACTED]

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2
-------------	---	-------------

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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



~~SECRET~~

# SWORN STATEMENT

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

## PRIVACY ACT STATEMENT

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**PRINCIPAL PURPOSE:** To provide commanders and law enforcement officials with means by which information may be accurately  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing and  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION [redacted] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 20070219	3. TIME 1740	4. FILE NUMBER
5. LAST NAME FIRST NAME MIDDLE NAME [redacted]	6. SSN [redacted]	7. GRADE/STATUS [redacted]	
8. ORGANIZATION OR ADDRESS 258 Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

9. [redacted], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:  
On 19 Feb 04, at 1428hrs, the IRF word was called for [redacted] refusing to co  
for a random cell search. The PL asked to come out he refused. I [redacted]  
[redacted] using the minimum amount of force necessary. We pulled him out to  
causeway where he was [redacted] cleared by medical. They searched his cell and we placed  
back in his cell. No IRF team members were injured. [redacted]  
-///End of Statement///-  
[redacted]

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT  
[redacted]

PAGE 1 OF 2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE 1  
MUST BE BE INDICATED.

~~SECRET~~

# SWORN STATEMENT

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## PRIVACY ACT STATEMENT

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

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMM) 20040219	3. TIME 1746	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS 254 Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

[REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:  
 On 19 Feb 2004 At approx 1429 [REDACTED] ISIV [REDACTED] refused a random cell search  
 [REDACTED] RF team we went in [REDACTED]  
 [REDACTED] then carried him out to the cargo wagon where he was cleared by medics  
 we put him back in his cell unsecured him and exited I used minimum arm.  
 of force [REDACTED] 11/E [REDACTED] parent 11/E

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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

# SWORN STATEMENT

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

## PRIVACY ACT STATEMENT

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

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 20040319	3. TIME 1740	4. FILE NUMBER
5. LAST NAME FIRST NAME MIDDLE NAME	6. SSN	7. GRADE/STATUS	
8. ORGANIZATION OR ADDRESS 256 Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

9. [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:  
 While assigned as a member of the alt IFF team 1A FEB 04 we performed a forced cell extraction on [REDACTED] 150# [REDACTED] for refusing a fair cell search. we went into the cell at 1428 Hrs. US the minimum amount of force. He was taken of his cell and placed on the floor until his c was searched. we placed him back into his c there were no injuries. [REDACTED] 11 End of [REDACTED]

10. EXHIBIT	11. INITIALS OF [REDACTED] MAKING STATEMENT	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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

# SWORN STATEMENT

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

## PRIVACY ACT STATEMENT

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

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 20040214	3. TIME 1740	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS 254th Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

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

On 19 February 2004 at approx. 1428 hours, while [REDACTED]  
[REDACTED] IRF team we were called to [REDACTED] block to IRF [REDACTED]  
number [REDACTED] for refusing a random cell search. I [REDACTED]  
[REDACTED] using the minimum amount of force necessary. [REDACTED]  
we carried him to the cross-way for [REDACTED] to be check by the  
the detainee was then returned to his cell. No mps or detainee's were in  
during this IRF. [REDACTED]

/// END OF STATEMENT [REDACTED] ///

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]

PAGE 1 OF 2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE 1 MUST BE BE INDICATED.

# 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 accurate.  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing a  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION	2. DATE (YYYYMMDD) 20050619	3. TIME 1800	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME		6. SSN	7. GRADE/STAT

## 8. ORGANIZATION OR ADDRESS

N PGB, BRAVO COMPANY, CAMP [REDACTED], CAMP DELIA, CTMO CUBA

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

ON JUNE 05 AT ABOUT 1700 THE ALTERNATE IRF CODE "ELVIS" WAS CALLED. CAMP [REDACTED] I EXITED [REDACTED] BLOCK [REDACTED] TO SUIT UP IN CAMP [REDACTED] CAUS. AFTER SUITING UP WE WERE BRIEFED ON [REDACTED] (ISU [REDACTED]). THE ALTERNATE IRF TEAM PROCEEDED TO [REDACTED] BLOCK TO FORCE CELL [REDACTED]. AFTER [REDACTED] IRF TEAM MEMBER CHECKED DETAINEE'S POSITION. THE DOOR WAS OPENED THE IRF TEAM MOVED INTO THE CELL USING MINIMUM AMOUNT OF FORCE NECESSARY. WE GOT THE DETAINEE ON GROUND AND USED FLEX CUFFS TO RESTRAIN HANDS AND LEGS. AFTER HANDS AND LEGS WERE RESTRAINED A QUICK CHECK [REDACTED] WAS FOUND TO BE INJURED. USING PROPER PROCEDURE WE MOVED DETAINEE TO CAUSWAY. MED CORPMAN CHECKED [REDACTED] HE WAS FOUND TO BE OK. AS [REDACTED] MAN FOR IRF TEAM. THE CORPMAN THEN STRAPPED [REDACTED] TO MED BORD. THE TEAM THEN LIFTED [REDACTED] AND WE ESCORTED DETAINEE TO [REDACTED] BLOCK. THE IRF TEAM REMOVED DETAINEE FROM MED BORD THEN PLACED DETAINEE IN CELL [REDACTED] ONCE PLACED IN CELL WE PROCEEDED THE TEAM. THE [REDACTED] REPORTED TO MEDICAL, THE REST OF THE TEAM REPORTED BACK TO CAUSWAY. FOR DEBRIEF, I PARTICIPATED AS [REDACTED] AND SNACKLES [REDACTED]

11 END OF STATEMENT

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 1

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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C4-0228

SIR 29FEB04-DO1

1. Category: N/A
2. Type of Incident: Forced Cell Entry
3. Detainee ISN: [REDACTED]
4. Date/Time of Incident: 29 Feb 04/0655hrs
5. Location: Camp Delta, GTMO, Cuba
6. Other information:
  - (a) Racial (Y/N): N
  - (b) Trainee Involvement (Y/N): N

7. Personnel involved:

A. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

B. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

C. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

D. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)

(f)  
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7. Summary of Incident: On 29 Feb 04, at approx. 0655hrs, ISN [REDACTED] detainee refused to shackle up for the Escort MPs to take him to Reservations. The IRF Team was activated and they extracted him from his cell using the minimum amount of force necessary. The detainee was checked by Medical and turned over to the Escort Team for transport to reservations. [REDACTED]

8. Remarks: See medical information in summary of incident

9. Publicity: N/A

10. Commander Reporting: MG Miller, CJTF-GTMO, Guantanamo Bay, Cuba

11. Point of Contact: [REDACTED]

12. Downgrading Instructions: N/A

**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 accurate  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing an  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 20040229	3. TIME 0847	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME		6. SSN	7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS 463rd Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

\_\_\_\_\_, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH  
ON 2 Feb 04 At Approx 0655 WC (THE IRF Team) Entered the cell of \_\_\_\_\_ and e  
Detainee \_\_\_\_\_ He was forcefully extracted from his cell due to him refusing  
go to his Reservation Appt. I \_\_\_\_\_ on the IRF Team with the  
\_\_\_\_\_ and ensure  
the entire team uses the minimum amount of force necessary to perform the e  
After the extraction was performed the detainee was carried to the causeway where  
was cleared by medical, put in a 3-piece suit and placed on a back board, been  
refused to walk. He was then transported \_\_\_\_\_ reservation without further incident

///END of Statement ///

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT _____	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE 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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 PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accu-  
 ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing  
 DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2004 02 29	3. TIME 0754	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STAT	

8. ORGANIZATION OR ADDRESS  
 0103241 Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360

9. [REDACTED] WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH  
 On the 29th of Feb. 2004 [REDACTED] refused to go  
 of his cell for reservation. The SOG, PL, and CO were all notified.  
 [REDACTED] refused once more, The IRF team was called  
 approx. 0615 hrs. [REDACTED] on the ter  
 of force necessary. [REDACTED] using the minimal  
 IRF team secured the detainee on a back board and re  
 him to the escort team. Medical, Camera, [REDACTED]  
 all on scene, Medical cleared [REDACTED] complied.  
 Not used, because [REDACTED]  
 /// END OF STATEMENT ///

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT 0754 DATED 022904

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND P. MUST BE 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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**PRINCIPAL PURPOSE:** To provide commanders and law enforcement officials with means by which information may be accurately  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing and  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 20040228	3. TIME 0803	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	
8. ORGANIZATION OR ADDRESS 463rd Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

9. [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:  
 On 29 Feb 04 at about 0655 while conducting my duties as [REDACTED] the IRF team; my [REDACTED] ISN# [REDACTED] head using the minimum amount of force necessary. We entered cell because he refused to come out to reservation. We then mc [REDACTED] to Brown Building without further incident. [REDACTED]  
 /// End of Statement ///

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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# SWORN STATEMENT

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## PRIVACY ACT STATEMENT

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**PRINCIPAL PURPOSE:** To provide commanders and law enforcement officials with means by which information may be accurate  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing and  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYY [REDACTED] MDD) 2001 02 29	3. TIME 0756	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	

8. ORGANIZATION OR ADDRESS  
 463RD Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360

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

At approximately 0655 on 27 FEB 2001 the IRT team was called to [REDACTED] block for a cell extraction. [REDACTED] ISN # [REDACTED] had refused reservation. Said detainee was lying on the floor, face down, wanting to be cuffed and removed. The IRT gave the IRT team permission to proceed and we entered [REDACTED]

The detainee was secured and removed using the minimum amount of force and taken to the front of [REDACTED] block to be examined by medical. He was cleared by medical, placed on a backboard and taken to reservation [REDACTED]

///End of Statement///

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]

PAGE 1 OF 2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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

# SWORN STATEMENT

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## PRIVACY ACT STATEMENT

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**PRINCIPAL PURPOSE:** To provide commanders and law enforcement officials with means by which information may be accurately  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing and  
**DISCLOSURE:** Disclosure of your social security number is voluntary

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYY) 2004 02 29	3. TIME 0852	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME		6. SSN	7. GRADE/STATUS

8. ORGANIZATION OR ADDRESS  
463rd Military Police CO, Camp Delta, Guantanamo Bay Cuba 09360

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

On February 29th of 2004 at approx. 0655 hrs the IRF code given [REDACTED] I immediately headed to the cosway where dawned our IRF gear and got our brief. The detainee was (ISN [REDACTED]) subject was compliant, upon p[er]ing the extration the subject was carried out to the cosway where was placed in a 3 piece suit and cleared by medical in cosway he was taken to reservation. All of this was done using the amount of force, I [REDACTED] on the team [REDACTED]

/// End of Statement

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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

04-0216

SIR 01MAR04-D01

1. Category: N/A
2. Type of Incident: Forced Cell Extraction
3. Detainee ISN: [REDACTED]
4. Date/Time of Incident: 1 Mar 04/0615
5. Location: Camp Delta, GTMO, Cuba
6. Other information:
  - (a) Racial (Y/N): N
  - (b) Trainee Involvement (Y/N): N

7. Personnel involved:

A. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
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7. Summary of Incident: On 1 Mar 04, at approx. 0615hrs, detainee ISN [REDACTED] refused to shackle up for transportation to Reservations. The IRF Team was activated and they extracted the detainee from his cell using the minimum amount of force necessary. The detainee was checked, cleared by medical, and turned over to the Escort Team for transport to Reservations. [REDACTED]

8. Remarks: See medical information in summary of incident

9. Publicity: N/A

10. Commander Reporting: MG Miller, CJTF-GTMO, Guantanamo Bay, Cuba

11. Point of Contact: [REDACTED]

12. Downgrading Instructions: N/A

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  
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate  
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE 2011 Mar 4	3. TIME 0700	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/STATUS	
8. ORGANIZATION OR ADDRESS Military Police, Camp Delta, Guantanamo Bay Cuba 09360			

\_\_\_\_\_, WANT TO MAKE THE FOLLOWING STATEMENT UNDER

On 17 Mar 2004 at approximately 0615 the IRE  
and I.I. being # 9 man was called to  
for Resurrection refusal by \_\_\_\_\_ ISN# \_\_\_\_\_  
Necessary the IRE team went into cell \_\_\_\_\_  
detainee \_\_\_\_\_ with no resistance  
taken out of that cell and to the conveyer,  
were Escort team took him \_\_\_\_\_  
the detainee ISN# \_\_\_\_\_ Refused  
/// end statement \_\_\_\_\_

Nothing Follows

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF
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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. MUST BE INDICATED.

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 ac  
 ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate fili  
 DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION: [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba  
 2. DATE (YYYYMMDD): 2004 March 01  
 3. TIME: 0705  
 4. FILE NUMB  
 5. LAST NAME FIRST NAME MIDDLE NAME  
 6. SSN  
 7. GRADE/STA

8. ORGANIZATION OR ADDRESS: Military Police 119 FH, Camp Delta, Guantanamo Bay Cuba 09360

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

On March 1 2004 at approximately 0615 the [REDACTED] IRF team  
 of [REDACTED] and my  
 being [REDACTED] was called [REDACTED] for Res.  
 [REDACTED] ISN# [REDACTED] and used the [REDACTED]  
 Force and [REDACTED] The IRF team went into the cell  
 and got the detainee ISN# [REDACTED] at first did not  
 want to walk so the IRF team carried detainee ISN# [REDACTED]  
 out side when we put him down he said he would walk and escort team  
 Detainee ISN# [REDACTED] out. // End Statement

*Walking Solves*

10. EXHIBIT  
 11. INITIALS OF PERSON MAKING STATEMENT  
 PAGE 1 OF

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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



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  
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate  
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2004 03 01	3. TIME 0705	4. FILE NU
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/	
8. ORGANIZATION OR ADDRESS 601 Military Police CO, Camp Delta, Guantanamo Bay Cuba 09360			

\_\_\_\_\_, WANT TO MAKE THE FOLLOWING STATEMENT UND  
on 1 March 2004 at approximately at 0615 the IRF Team  
called up to \_\_\_\_\_ Block due to refusal of Reserva  
IRF Team made up of \_\_\_\_\_  
and myself \_\_\_\_\_ went in to IRF \_\_\_\_\_ ISA  
using the minimum amount of force necessary. My posit  
team leader \_\_\_\_\_  
we had the Detainees outside in the Causeway he we  
\_\_\_\_\_ and the escort team took the detainees away.  
End of Statement \_\_\_\_\_

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 1

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_

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

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  
ROUTINE USES: Your social security number is used as an additional/ means of identification to facilitate  
DISCLOSURE: Disclosure of your social security number is voluntary

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 20040301	3. TIME 0730	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME	6. SSN	7. GRADE/	
8. ORGANIZATION OR ADDRESS 661 Military Police 119th FH, Camp Delta, Guantanamo Bay Cuba 09360			

... WANT TO MAKE THE FOLLOWING STATEMENT UNDER  
ON MARCH 01 2004 AT APPROXIMATELY 0615, THE I  
TEAM COMPOSED OF  
and myself was called to form up d  
a refusal from ISN  
go to reservation. I  
so when we entered the cell,  
using the minimum amount  
force, of ISN  
when ISN was taken  
the cell and outside, he was cleared from  
and walked willingly to his reservation. NO  
were injured during the movement //End of

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT	PAGE 1 OF
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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

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  
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate  
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba  
2. DATE (YYYYMMDD) 10/04/03  
3. TIME 0700  
4. FILE NUM  
5. LAST NAME, FIRST NAME, MIDDLE NAME  
6. SSN  
7. GRADE/5

8. ORGANIZATION OR ADDRESS  
(C) Military Police 119th FA, Camp Delta, Guantanamo Bay Cuba 09360

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

On March 1st 2004 at approximately 0615 the [REDACTED] composed of [REDACTED] called to [REDACTED] block for a reservation [REDACTED] by [REDACTED] (ISN# [REDACTED]) the [REDACTED] minimum amount of force was used. The [REDACTED] (ISN# [REDACTED]) laid down on his chest. Cell I, [REDACTED] as the #2 man [REDACTED] The IRE Team carried [REDACTED] (ISN# [REDACTED]) out of his cell of the block. The medical team did a routine check everyone was all right. The escort team shackled the [REDACTED] (ISN# [REDACTED]) into a three piece suit. A [REDACTED] (ISN# [REDACTED]) walked to Res on his own. End of Statement ///

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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04-0187

SIR 29FEB04-DO5

1. Category: N/A
2. Type of Incident: Forced Cell Entry
3. Detainee ISN: [REDACTED]
4. Date/Time of Incident: 29 Feb 04/1510hrs
5. Location: Camp Delta, GTMO, Cuba
6. Other information:
  - (a) Racial (Y/N): N
  - (b) Trainee Involvement (Y/N): N

7. Personnel involved:

A. Subject:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)

B. Su

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- (b)
- (c)
- (d)
- (e)
- (f)
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- F. Su
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- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)
- (i)
- (j)
- G. De
- (a)
- (b)
- (c)
- (d)
- (e)
- (f)

7. Summary of Incident: On 29 Feb 04, at approx. 1510hrs, detainee ISN [REDACTED] refused to shackle up for a random cell search. The IRF Team was activated and they extracted him from his cell using the minimum amount of force necessary. The detainee was [REDACTED] checked by Medical and returned to his cell. [REDACTED]

8. Remarks: See medical information in summary of incident

9. Publicity: N/A

10. Commander Reporting: MG Miller, CJTF-GTMO, Guantanamo Bay, Cuba

11. Point of Contact [REDACTED]

12. Downgrading Instructions: N/A

# SWORN STATEMENT

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

## PRIVACY ACT STATEMENT

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

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba  
2. DATE (YYYYMM) 2004/02/29  
3. TIME 1548  
4. FILE NUMBER [REDACTED]  
5. LAST NAME FIRST NAME MIDDLE NAME [REDACTED]  
6. SSN [REDACTED]  
7. GRADE/STATUS [REDACTED]  
8. ORGANIZATION OR ADDRESS 463rd Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360

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

On Feb. 29, 2004 at about 1510. I was called on to do a force cell move on [REDACTED] ISN [REDACTED]. The reason for movement was for a random cell search and detainee wouldn't come out of his cell. I [REDACTED] and m [REDACTED] we enter the cell with the minimum amount of force and took him out to the rec y were medical cleared him. When then took him back to his cell and exit the cell where nothing else happened. ||| End of Statement ||| [REDACTED]

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]

PAGE 1 OF 2 PAG

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT [REDACTED] TAKEN AT [REDACTED] DATED [REDACTED]"

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## 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 accurate.  
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**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYY-MM-DD) 20040229	3. TIME 1630	4. FILE NUMBER [REDACTED]
5. SSN [REDACTED]		7. GRADE/STATUS [REDACTED]	

8. ORGANIZATION OR ADDRESS  
 463rd Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360

[REDACTED] WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH  
 ON 24 FEB 04 AT APPROX 1510 THE IRF TEAM ENTERED THE CELL OF [REDACTED]. THE [REDACTED]  
 [REDACTED] REFUSED TO EXIT HIS CELL FOR A RANDOM CELL SEARCH. [REDACTED]  
 [REDACTED] OF THE DETAINEE, I ALSO MUST ENSURE THAT THE IRF TEAM HAS A WHOLE USE  
 MINIMUM AMOUNT OF FORCE NECESSARY TO SAFELY PERFORM THE EXTRACTION. THE DETAINEE  
 MOVED TO THE REE YARDS WHERE HE WAS CLEARED BY MEDICAL AND THEN RETURNED TO  
 CELL WITHOUT FURTHER INCIDENT [REDACTED] /// End of Statement ///

10. EXHIBIT

11. [REDACTED] PERSON MAKING STATEMENT

PAGE 1 OF 2

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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# SWORN STATEMENT

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

## PRIVACY ACT STATEMENT

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

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 20040229	3. TIME 1527	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS 463rd Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

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

On 29 Feb 04 at about 1510 while conducting my duties as [REDACTED]  
[REDACTED] IRF team [REDACTED]  
the minimum amount of force necessary the reason we entered  
ISN [REDACTED] was because he refused a random cell search.  
was removed from his cell using the minimum amount of force ne  
//End of Statement//

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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## PRIVACY ACT STATEMENT

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

1. LOCATION Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2004 02 29	3. TIME 1529	4. FILE NUMBER
5. LAST NAME FIRST NAME MIDDLE NAME	6. SSN	7. GRADE/STATUS	
8. ORGANIZATION OR ADDRESS 463 <sup>RD</sup> Military Police COMPANY, Camp Delta, Guantanamo Bay Cuba 09360			

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

ON 29 FEB 04 AT APPROXIMATELY 1510 HOURS I RESPONDED WITH THE IRF TEAM TO [REDACTED] BLOCK BECAUSE [REDACTED] ISN: [REDACTED] REFUSED TO COME OUT OF HIS CELL FOR A RANDOM CELL SEARCH I ENTERED [REDACTED] AND SECURED HIS RIGHT ARM USING THE MINIMUM AMOUNT OF FORCE NECESSARY. WE THEN TOOK HIM TO THE EXERCISE YARD WHERE HE WAS CLEARED BY MEDIC AND HIS CELL WAS SEARCHED. WE THEN PUT HIM BACK IN HIS CELL AND EXITED. [REDACTED] // END OF STATEMENT //

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2 PAGE
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT" TAKEN AT DATED

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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 maintained.  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing and processing of your statement.  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION [REDACTED] Block, Camp Delta, Guantanamo Bay Cuba	2. DATE (YYYYMMDD) 2004 02 29	3. TIME 1530	4. FILE NUMBER [REDACTED]
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS [REDACTED]	
8. ORGANIZATION OR ADDRESS 4632 Military Police Company, Camp Delta, Guantanamo Bay Cuba 09360			

9. [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH  
 ON 29 Feb 04 at 1510 I RF Team was called to [REDACTED] refuse  
 Random Cell search. I [REDACTED] using the leo  
 amount of force necessary. Once secure we escorted out to rec yard, were  
 cleared him. Once cleared [REDACTED] was brought back to cell. [REDACTED]

*End of Statement*

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 2
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_"

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[REDACTED]