


SIR 080750RFEB04

1. Category 

Type of Incident: Forced Cell Extraction – Detainee ISN: 

3. Date/Time of Incident: 080750RFEB04

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)



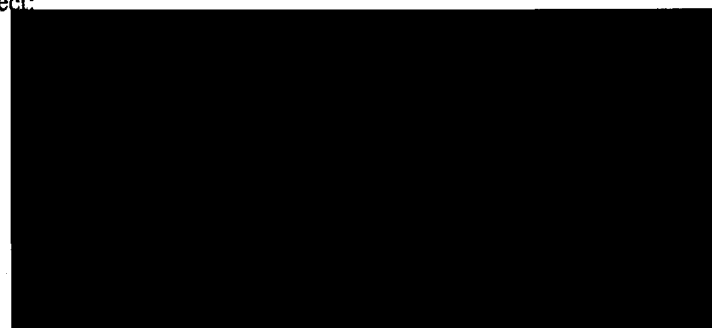
B. Subject:

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



C. Subject:

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



D. Subject:

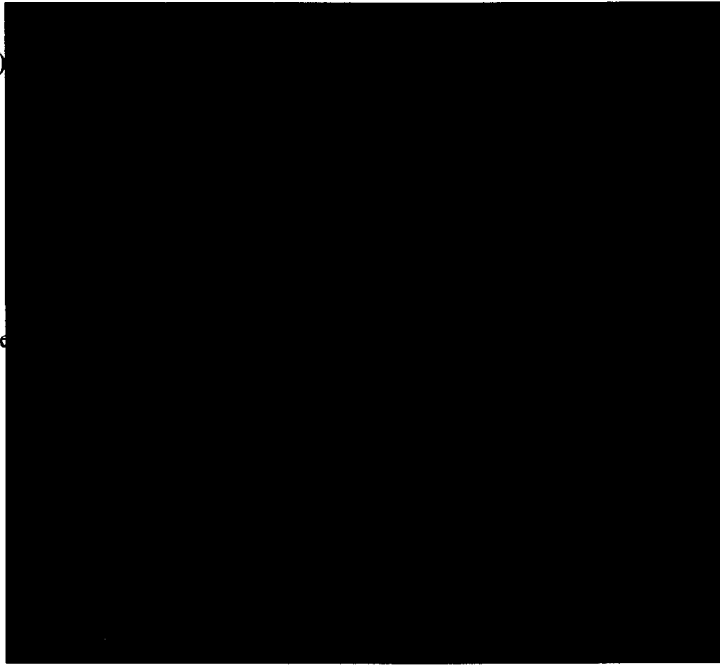
- (k)
- (l)



- (m)
- (n)
- (o)
- (p)
- (q)
- (r)
- (s)
- (t)

E. Subject

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



J(1) Detainee:

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



J(2) Detainee:

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



J(3) Detainee:

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



J(4) Detainee:

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



[REDACTED]

J(5) Detainee:

[REDACTED]

Summary of Incident: At approximately 0750hrs 08 February 2004, [REDACTED] Block personnel approached detainees housed in [REDACTED], [REDACTED] for the purpose of conducting cell searches; all detainee refused. [REDACTED] Block personnel informed the detainees that the cell searches were not optional; and again, the detainees refused. After the detainees refused the chain of command at Camp 2/3, at approximately 0756hrs the primary IRF team at Camp 2/3 was assembled, medical support was called along with video camera support, and the recreation area prepped for [REDACTED] purposes. Once medical support and video support were present at [REDACTED] block, each of the detainees were given another opportunity to comply and refused yet again. [REDACTED] of the detainees, ordered the 5person IRF team to enter into their respective cells and forcibly removed detainees from their respective cells and move each one to the recreation area for [REDACTED] purposes. Once in the recreation area, all detainees received medical attention, which consisted of [REDACTED]. Once medical personnel cleared each of the detainees, the IRF team moved detainees to their respective cells. The cell extraction of detainees went well. There were no injuries to any of the assigned [REDACTED] block personnel, IRF team members or detainees.

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
- [REDACTED]

SWORN STATEMENT

For use on this form, see [redacted] the proponent agency is DCSOPS

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) 2004/07/08
3. TIME 1110
4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME
6. SSN
7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS
255TH MP CO.

9. I, [redacted], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:
AT APPROXIMATELY 0726 HOURS ON FEBRUARY 4 WHILE WORKING AS [redacted] BLOCK GUARD ON [redacted]
I WAS NOTIFIED BY MY BLOCK NCO, [redacted] TOLD ME TO REPORT TO THE CAVALRY
A FORCED CELL EXTRACTION ON S BLOCK. MY TEAM RESPONDED, DROPPED OUR ICF GEAR
PROCEEDED TO [redacted] BLOCK. MY TEAM WAS BRIEFED BY THE PL2, [redacted] OF
CAVALRY AND AT 0738 HOURS, PERFORMED [redacted] A FORCED CELL EXTRACTION ON [redacted]
WE ALSO PERFORMED FORCED CELL EXTRACTIONS ON: [redacted]
[redacted] AND [redacted]. I WAS THE NUMBER ONE &
THE TEAM LEADER FOR THE ALTERNATE ICF TEAM. I SECURED THE GENT ICF AND HELPED
PERFORM MARK TOUR MAN SHACKLE THE DETAINees. THE TEAM TOOK ALL THE ABOVE IN
OUT OF THEIR CELLS TO THE LEFT OPERAC YARD WHERE THEY WERE SEEN BY MEDICAL, AND
BACK IN THEIR CELLS. THE TEAM CONDUCTED AN AAR AFTER EACH FORCED CELL EXTRACTION.
USED THE MINIMAL AMOUNT OF FORCE NECESSARY. [redacted]
/// END OF STATEMENT ///

10. EXHIBIT
11. INITIALS OF PERSON MAKING STATEMENT [redacted]
PAGE 1 OF 0

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

~~SECRET~~  
**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.

<b>1. LOCATION</b> █ Block, Camp D, Guantanamo Bay Cuba	<b>2. DATE (YYYYMMDD)</b> 2004 02 08	<b>3. TIME</b> █ 1114	<b>4. FILE NUMBER</b>
<b>5. LAST NAME, FIRST NAME, MIDDLE NAME</b> █	<b>6. SSN</b> █	<b>7. GRADE/STATUS</b> █	
<b>8. ORGANIZATION OR ADDRESS</b> 258 CO, Camp D, Guantanamo Bay Cuba			

9. I, █, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:  
AT APPROXIMATELY 0726 HOUR ON 08 FEB 2004 WHILE WORKING AS █ BLOCK GUARD ON █ BLOCK, I WAS TOLD BY BLOCK NCO █ REPORT TO CAUSE WAY FOR A █ FORCEFUL CELL EXTRACTION ON █ BLOCK. A TOW IRF CREW AND REPORTED TO █ BLOCK, WAS BRIT BY █ AT 0738 HOUR, AFTERWARD A █ WE ALSO PERFORMED FORCEFUL CELL EXTRACTION ON █ AT 0754 HOURS, █ AND █ ON THE ALTERNATE IRF TEAM █ REMOVED THEM TO RECREATION YARD WHERE THEY WERE CLEARED BY █ MEDICAL, I USED THE MINIMAL AMOUNT OF FORCE NECESSARY. AFTER EACH FORCE CELL EXTRACTION THERE WAS AN AAR. █  
/// ENAL C.C. STATEMENT III █

<b>10. EXHIBIT</b>	<b>11. INITIALS OF PERSON MAKING STATEMENT</b> █	<b>PAGE 1 OF 2 PAGES</b>
<b>ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT █ TAKEN AT █ DATED █"</b>		
<b>THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.</b>		

For use on this form, see AR 190-46; the proponent agency is JDCSOPS

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 07	3. TIME 1100	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME █	6. SSN █	7. GRADE/STATUS █	
8. ORGANIZATION OR ADDRESS 25 <sup>th</sup> MI Co			

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

On 08 February 04, at approx. 0726 hrs █ was called. I was █ the minimal amount of force necessary, we responded to █ block because the detainees ref to come out of their cells for cell searches. We ~~that~~ removed following detainees from their cells. Cell # █ at 0738 hrs, Cell █ at 0754 hrs, Cell █ at 0833 hrs, Cell █ at 0902 hrs, and Cell █ at 0941 hrs. All detainees were removed from their taken to the rec. yard and █ and then returned to their. The minimal amount of force necessary was used ~~each~~ with detainees. After each extraction we conducted a █ //

/END OF STATEMENT/

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT █	PAGE 1 OF 0
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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 JDCSOPS

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) 20040908	3. TIME /:00 0620	4. FILE NUMBER [redacted]
5. LAST NAME, FIRST NAME, MIDDLE NAME [redacted]	6. SSN [redacted]	7. GRADE/STATUS [redacted]	

8. ORGANIZATION OR ADDRESS  
[redacted] JTF C-TRAC

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

ON February 5, 2004 at approximately 0726 hrs. I was called to respond to a forced cell extraction on [redacted] Block. The detainees were refusing to leave their cells for recreation cell services. The detainees who were extracted were [redacted] 0730. After they were extracted medical check them over and we return them to their cells. My position on the team was [redacted] of the detainees, using the least amount of force necessary. The detainees in cell [redacted] and [redacted] was [redacted]. // END OF STATEMENT //

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [redacted]	PAGE 1 OF 0
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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 DA Form 190-48; the proponent agency is DCSOPS

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): 20040208
3. TIME: 1140
4. FILE NUMBER:
5. LAST NAME, FIRST NAME, MIDDLE NAME:
6. SSN:
7. GRADE/STATUS:

8. ORGANIZATION OR ADDRESS: 255th MP Co STF GTMO

9. I, [redacted], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:
On February 8, 2004 at approximately 0720hrs I was called to respond to a forced cell extraction on [redacted] block. The detainees were refusing to leave their cells for random cell searches. The detainees who were extracted are as follows: [redacted] 0738hrs, [redacted] 0754hrs, [redacted] 0833hrs, [redacted] 0913hrs and [redacted] 0941hrs. [redacted] alternate team.

[redacted] Upon arrival I was briefed by the block NCIC at which point the alternate team performed the [redacted] aforementioned cell extractions. The detainees were extracted then shaved about the head and feet. All aforementioned detainees were cleared by medical and returned to their original cells. All actions performed by me [redacted] with the least amount of force necessary, in accordance with the S.O.P. The above detainees are: [redacted]

[redacted] and [redacted] performed after each cell extraction. /// ----- END OF STATEMENT -----

10. EXHIBIT:
11. INITIALS OF PERSON MAKING STATEMENT: [redacted]
PAGE 1 OF 0

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.