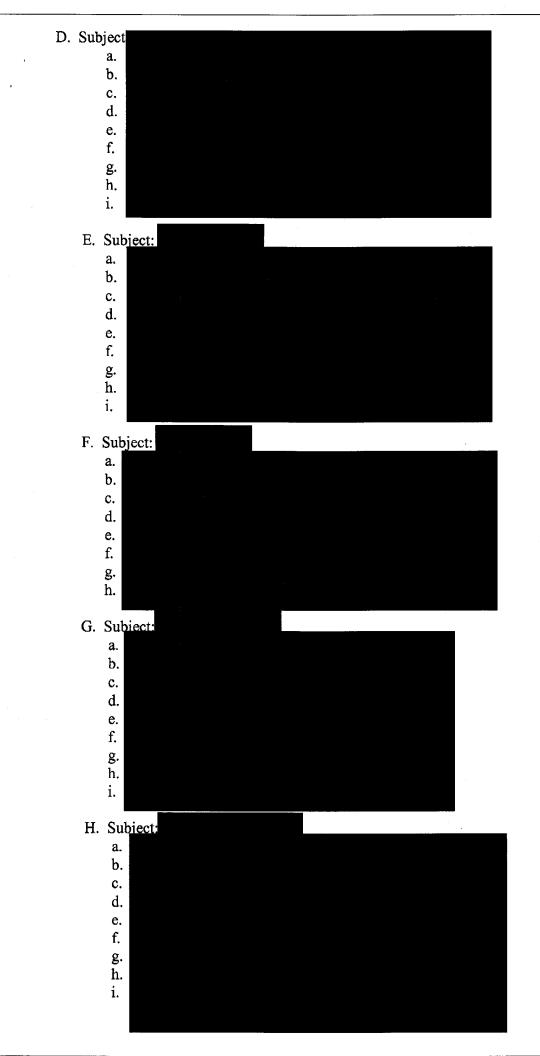
1. Category: 2. Type of incident: Forced Cell Extraction of a Detainee 3. Detainee ISN: 4. Date/Time of incident: 28 NOV 04/ 0855hours 5. Location: Camp GTMO, Cuba 6. Other information: a. Racial (Y/N): N 7. Personnel Involved: A. Subject: a. b. c. d. e. f. g. h. i. B. Subject: Ъ. d. e. f. C. Subject: a. b. c. d. e. f. g. h. i.



I. Subject: a. b. c. d. e. f. g. h. i.		
J. Subject: j. k. l. m. n. o. p. q. r.		
K. Detainee: a. b. c. d. e.		
secured in hand and leg irons without inci	reation. Detainee was told that he tainee was noncompliant to Wing 0840 hours, Intel Team, Behavior was called, but declined to come x 0855 hours, Medical, and Behavior to their commands to exit celled preceded to the preceded to the was present. Upon entry the dident. The detainee was removed	g NCO and oral Science, ne saying it avioral Science. The Force Cell ecciving letainee was d from the cell nedical staff.
was then put in secure The mini secure the detainee. There were no injurie	mum amount of force necessary	was used to
9. Remarks:		
10. Publicity: N/A	TITE CTMO and Guantanama	Bay Cuha
11. Commander Reporting: BG Hood, C	JIT-OTIVIO, and Guantanamo	
12. Point of Contact:		
13. Downgrading instructions: N/A		

		SWORN STATEMEN		
	For use of this form	n, see AR 190-45; the propor	nent agency is ODCSOPS	
		PRIVACY ACT STATEMEN		10.40.40.4001
PRINCIPAL PURPOSE:	Title 10 USC Section 301; Ti To provide commanders and I			
ROUTINE USES:				to facilitate filing and retrieval.
DISCLOSURE:	Disclosure of your social secu	rity num s voluntary.		
1. LOCATION CELLWIN		19034 1 00	00) 3: TIME 0915	4. FILE NUMBER
5. LAST NAME, FIRST	NAME, MIDDLE NAME	6. SSN	•	7. GRADE/STATUS
8. OR TANIZATION OR CAMI TF-GTMO	ADDRESS GAUNTANAMO BAY, C	UBA APO AE 09360		
9.			KE THE FOLLOWING STA	
That 15	N# Refused	to cooperate w	ith the MP's b	yaputing his
asked to co	operate numera	us limes but he	replied "I'm no	very time they and all force cell extraction End of State mer
Will not allo	ow the mp's to	Hamiliate me.	If they come in	I will fight #
like a man.	If they do this I	Will throw Shit	in there face en	verytime they
Open the be	an Hole." MP's	Removed -	From his Cell a	and all
items were	taken away.	Detainre was not	hurt during the	force cell extraction
-			770.	Frd of Statemer
	_			
		N.F.E		
		V.E.E.		
		•		
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10. EXHIBIT		11. INITIALS OF PERSON	MAKING STATEMENT	PAGE 1 OF PAGES
ADDITIONAL PAGES MU	UST CONTAIN THE HEADING	"STATEMENTTAN	KEN AT DATED	
THE BOTTOM OF EACH MUST BE BE INDICATED		AR THE INITIALS OF THE PE	ERSON MAKING THE STA	TEMENT, AND PAGE NUMBER

DA FORM 2823, JUL 72, IS OBSOLETE

DA FORM 2823, DEC 1998

USAPA V1.00

,	For use of this form	SWORN STATE , see AR 190-45; the		s ODCSOPS		
AUTHORITY: PRINCIPAL PURPOSE: ROUTINE USES: DISCLOSURE:	Title 10 USC Section 301; Tit To provide commanders and la Your social security number is Disclosure of your social secu	aw enforcement offici used as an additional ity number is volunta	1; E.O. 9397 dated als with means by w /alternate means of ry.	vhich information t	on may be accurate o facilitate filing ar	nd retrieval.
1. LOCATION CELL WIN	GCAMP_JTF-GT	77711	2 8 Ø	933 133	4. FILE NUMBER	
8. ORC NIZATION OR CAMF JTF-GTMO 9.		6. SSN JBA APO AE 09360			7. GRADE/STĄTI	
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			check ea	ich exi	to each . tremity	extremit For
MINP	use of restrain	azmsti tn	applied to		of F STATEMEN	VT'///
10. EXHIBIT		11. INITIALS OF	ERSON MAKING ST		AGE 1 OF	PAGES
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DA FORM 2823, DEC 1998

DA FORM 2823, JUL 72, IS OBSOLETE

USAPA V1.00

,	For use of this form	SWORN STATEMENT see AR 190-45; the proponent agency is ODCSOPS
		PRIVACY ACT STATEMENT
PRINCIPAL PURPOSE: To	itle 10 USC Section 301; Title	s 5 USC Section 2951; E.O. 9397 dated November 22, 1943 <i>(SSN)</i> . w enforcement officials with means by which information may be accurately
ROUTINE USES: Yo	our social security number is u isclosure of your social securit	used as an additional/alternate means of identification to facilitate filing and retrieval. ty number is voluntary.
1. LOCATION		2. DATE (YYYYMMOD) 3. TIME 4. FILE NUMBER
CELLWING_		MO 2004 11 28 7. GRADE/STATUS
	ddress AUNTANAMO BAY, CUF	BA APO-AE 09360
9.		, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:
0 N TYE	- ABOUZ DA	TE AND AT APPROXIMATELY D850
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EXTRAC	TION TEAM ((ECE). I WHSO ASSIGNED A THE
NUMBER	2 H MAN, AS	7516NED
		PPROXIMATELY 0850 I RESPONDED
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		DETAINER- WAS MOUSED A FORCE
CELL 8	WIRKCIUN	WAS PRIFORMEN I
C- C-		USING THE MINIMUM AMOUNT OF
		WITH OUT FURTHER INCIDENT MEND OF
STATEM	111. TW. P	
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10. EXHIBIT		11. INITIALS OF PERSON MAKING STATEMENT PAGE 1 OF PAGES
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		EAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER
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	For use of this form	, see AR 190-45; the proponent a	igency is ODCSOPS	· · · · · · · · · · · · · · · · · · ·
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AUTHORITY: PRINCIPAL PURPOSE:		le 5 USC Section 2951; E.O. 939 aw enforcement officials with mea		
ROUTINE USES:		aw enforcement officials with mea used as an additional/alternate me		
DISCLOSURE:	Disclosure of your social secur	rity number is voluntary.		
1. LOCATION CELL WIN	G CAMP JTF-GT	2. DATE (YYYYMMDD)	3. TIME	4. FILE NUMBER
5. LAST NAME, FIRST		ГМО <u> </u>	0920	7 GRADE/STATUS
5. LASI	WAINE, WILLIAM	I V. Walt		
	ADDRESS GAUNTANAMO BAY, CU	JBA APO-AE 09360		
9.		, WANT TO MAKE TH	HE FOLLOWING STA	TEMENT UNDER OATH:
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PERFORMED ON	DETAINEE ISN:			<u> </u>
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THE ROTTOM OF FACH	ADDITIONAL PAGE MUST BE	AR THE INITIALS OF THE PERSON	V MAKING THE STA	TEMENT, AND PAGE NUMBER

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7 (1 438		CY ACT STATEMENT	agency is about it		· · · · · · · · · · · · · · · · · · ·
		Section 2951; E.O. 93			
·		ement officials with m an additional/alternate			
	social security numb				
1. LOCATION CELL WING CAMP	TE CTMO .	DATE (YYYYMMDD)	3. TIME 0430 hrs	4. FILE NUM	
5. LAST NAME, FIRST NAME, MIDDLE NA		6. SSN	TO420 HE	7. GRADE/S	
8. ORGANIZATION OR ADDRESS					
CAMP JTF-GTMO GAUNTANAMO	BAY, CUBA APO	O AE 09360			
9.		, WANT TO MAKE	THE FOLLOWING ST	ATEMENT UNDE	R OATH:
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THE BOTTOM OF EACH ADDITIONAL PAGE MUST BE BE INDICATED.	MUST BEAR THE IN	ITIALS OF THE PERSO	ON MAKING THE STA	ATEMENT, AND I	PAGE NUMBER

		ORN STATEMENT AR 190-45; the proponent a	agency is ODCSOPS		
PRINCIPAL PURPOSE: To pro ROUTINE USES: Your s DISCLOSURE: Disclosure	10 USC Section 301; Title 5 US ovide commanders and law enformation of the security number is used a source of your social security number.	orcement officials with mea as an additional/alternate m mber is voluntary.	ans by which informa neans of identification	ation may be accura n to facilitate filing a	and retrieval.
1. LOCATION CELL WING	0 1 1 1 D TWD 001 10	2. DATE (YYYYMMDD) ジベツ かもし ジタ	3. TIME	4. FILE NUMBER	1
5 LAST NAME, FIRST NAME,		6. SSN		7. GRADE/STAT	ſUS
8. ORGANIZATION OR ADDRE	ess NT <u>ANAMO</u> BAY, CUBA A	APO-AE 09360		,	
9.	bx r 28, 2004	, WANT TO MAKE TH	HE FOLLOWING STA) HRS	
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4 Person			•	fed the A	
OF Force De	CESSALTY-THA ON	"State ment	using the	MINIMAL.	amount
					,
10. EXHIBIT	11	OF PERSON MAN	KING STATEMENT	PAGE 1 OF	PAGES

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SWORN STATEMENT For use of this form, see AR 190-45; the proponent agency is ODCSOPS PRIVACY ACT STATEMENT Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN). AUTHORITY: PRINCIPAL PURPOSE: To provide commanders and law enforcement officials with means by which information may be accurately Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval. ROUTINE USES: DISCLOSURE: Disclosure of your social security number is voluntary 4. FILE NUMBER 1. LOCATION 2. DATE (YYYYMMD WING JTF-GTMO CAMP 3111 CELL 2004-11-28 7. GRADE/STATUS LAST NAME, FIRST NAME, MIDDLE NAME 6. SSN 8. ORGANIZATION OR ADDRESS CAMP JTF-GTMO GAUNTANAMO BAY, CUBA APO AE 09360 WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH: EXI THE 2004-11-28 AT APPROX. 0850 ISM # FCRCE CELL EXTRACTION WAS PERFORMED. 60 45 PEGISTING TO GOMPUED. TSH # 1914 ray 8510N 15 MO AND USE MILLITUM AMOUNT OF FORCE AS LIECES SARY. HEND OF STATEMENT.//-10. EXHIBIT 11. INII PERSON MAKING STATEMENT PAGE 1 OF **PAGES** ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT ___ TAKEN AT _ THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE BE INDICATED.

SWORN STATEMENT For use of this form, see AR 190-45; the proponent agency is ODCSOPS PRIVACY ACT STATEMENT Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN). AUTHORITY: To provide commanders and law enforcement officials with means by which information may be accurately PRINCIPAL PURPOSE: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval. ROUTINE USES: Disclosure of your social security number is voluntary. DISCLOSURE: FILE NUMBER 2. DATE (YYYYMMDD) 3. TIME 1. LOCATION JTF-GTMO WING CAMP CELL 20041128 0850 3117 GRADE/STATUS LAST NAME FIRST NAME, MIDDLE NAME 8. ORGANIZATION OR ADDRESS CAMP JTF-GTMO GAUNTANAMO BAY, CUBA APO AE 09360 , WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH: PREFORMED 28Nov2004 0850 Hen 0× ABOUT APPLIED CELL ISN: EXTRACTION ON AMOUNT USING THE MINITMAL NECESSARY.H HEND OF STATEMENUTH FORCE OF 11. INITIALS OF BERSON MAKING STATEMENT 10. EXHIBIT PAGE 1 OF Z **PAGES** ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT _____ TAKEN AT __ THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE BE INDICATED.

SWORN STATEMENT For use of this form, see AR 190-45; the proponent agency is ODCSOPS PRIVACY ACT STATEMENT Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN). AUTHORITY: To provide commanders and law enforcement officials with means by which information may be accurately PRINCIPAL PURPOSE: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval. ROUTINE U SES: DISCLOSURE: Disclosure of your social security number is voluntary. 3. TIME 4. FILE NUMBER DATE (YYYYMMD 1. LOCATION 1126 WING TTF-GTMO 200411-7.0 CELL ORGANIZATION OR ADDRESS JTF-GTMO GAUNTANAMO BAY, CUBA APO AE 09360 CAMP 9. , WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH: ON 28 NOU ZOOY OUT Approx 0830 detainer actused least shower and Also reformed To come out For cell search. AFTEN EXECUSTing all means possible To to comple the FCE Team was Assembled. Behavion Heath, the composman, and but were contracted After Numerous attempts by Behavior Heath, and the NUTC to get To comply the Fire team enatured detainer or in minimum Fonce necessary. The detainmen was brought to call where he was searched and then deared by medical Detained was then brought to was present o détainer on FCR Team ERSON MAKING STATEMENT 11, INITIA 10. EXHIBIT PAGE 1 OF **PAGES** ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER

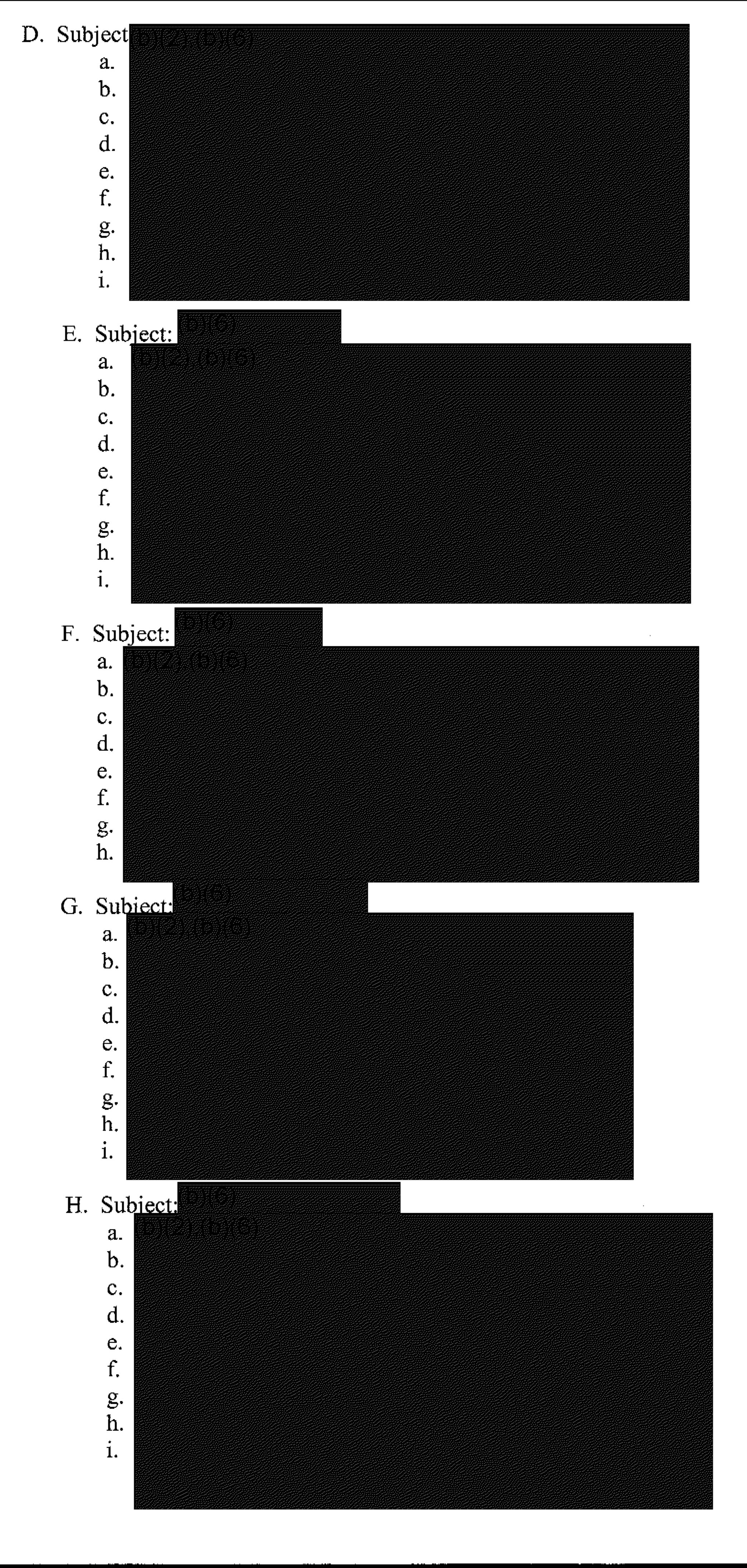
DA FORM 2823, DEC 1998

MUST BE BE INDICATED.

DA FORM 2823, JUL 72, IS OBSOLETE

USAPA V1.00

1.	Category:
2.	Type of incident: Forced Cell Extraction of a Detainee
3.	Detainee ISN:
4.	Date/Time of incident: 28 NOV 04/ 0855hours
5.	Location: Camp GTMO, Cuba
6.	Other information:
	a. Racial (Y/N): N
7.	Personnel Involved: A. Subject: a. b. c. d. e. f. g. h. i.
	B. Subject: a. b. c. d. e. f. g. h. i.
	C. Subject: a. b. c. d. e. f. g. h. i.



E. Subject: a. b. c. d. e. f. g. h. i.					
J. Subject: j. k. l. m. n. o. p. q. r.					
	e: a. b. c. d.				
fused to go	cident: At all out for show	er and recrea	ation. Detain	ee was told t	hat h

8. Summary of Incident: At about 0830 hours detainee ISN #
refused to go out for shower and recreation. Detainee was told that he must exit his cell for a cell search to be conducted. Detainee was noncompliant to Wing NCO and SOG's commands to exit cell. At approx 0840 hours, Intel Team, Behavioral Science, Medical, and DOC were called. Intel team was called, but declined to come saying it would only make things worse. At approx 0855 hours, Medical, and Behavioral Science arrived on site, Detainee was noncompliant to their commands to exit cell. The Force Cell Extraction Team (FCE) was assembled and preceded to after receiving authorization from FOG who was present. Upon entry the detainee was secured in hand and leg irons without incident. The detainee was removed from the cell and taken to where MP's searched him, evaluated and cleared by medical staff.

was searched, contraband found 3 cups, two salt packets, and orange peels. Was then put in the minimum amount of force necessary was used to secure the detainee. There were no injuries reported to the detainee or staff.

9. Remarks:

- 10. Publicity: N/A
- 11. Commander Reporting: BG Hood, CJTF-GTMO, and Guantanamo Bay Cuba
- 12. Point of Contact:
- 13. Downgrading instructions: N/A

,	For use of this for		STATEMENT 45: the proponent a	agency is ODCSOPS	· •		
<u></u>	101 000 01 mm		T STATEMENT	agency is oboth			
AUTHORITY:	Title 10 USC Section 301; Ti	itle 5 USC Section	on 2951; E.O. 939				
PRINCIPAL PURPOSE:	To provide commanders and			·			
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1. LOCATION CELL WIN	G CAMP TF-GT	2 ATE	E (YYYYMMDD)	3. TIME 0915	4. FILE NU	IMBER	
5. LAST NAME, FIRST	NAME, MIDDLE NAME		6, SSN		7. GRADE	/STATUS	
	ADDRESS OGAUNTANAMO BAY, C	UBA APO AE	09360				
9.				HE FOLLOWING STA			
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asked to co	operate numero	ins imes	= but he re	plied "In n	at an ani	imal.	<u>J</u>
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10. EXHIBIT		11. INIHALS	OF PERSON MAK	KING STATEMENT	PAGE 1 OF _		PAGES
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PAGE 1 OF PAGES		For use of this form	SWORN STA1 n, see AR 190-45; th		gency is ODCSOP	'S		
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NAME THE FOLLOWING STATEMENT UNDER OATH: At 0855 hours the code for the Forced cell extraction was transmitted over the Radio My Status in the FCE was to Record the team as they extracted ISN: 11. INITIALS OF PERSON MAKING STATEMENT PAGE 1 OF 2 PAGES	5. LAST NAME, FIRST 8. ORGANIZATION OF CAMP JTF-GTMC	T NAME, MIDDLE NAME R ADDRESS	MO 2004112 6. SS	2 X SN	-	1311	17_	
PAGE 1 OF PAGES	At 0855 Was tran FCE Was	15mitted over	the Radi	the Fo	orced ce State They ex OF STA	in tracted for the second	traction the desired of the	**************************************
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