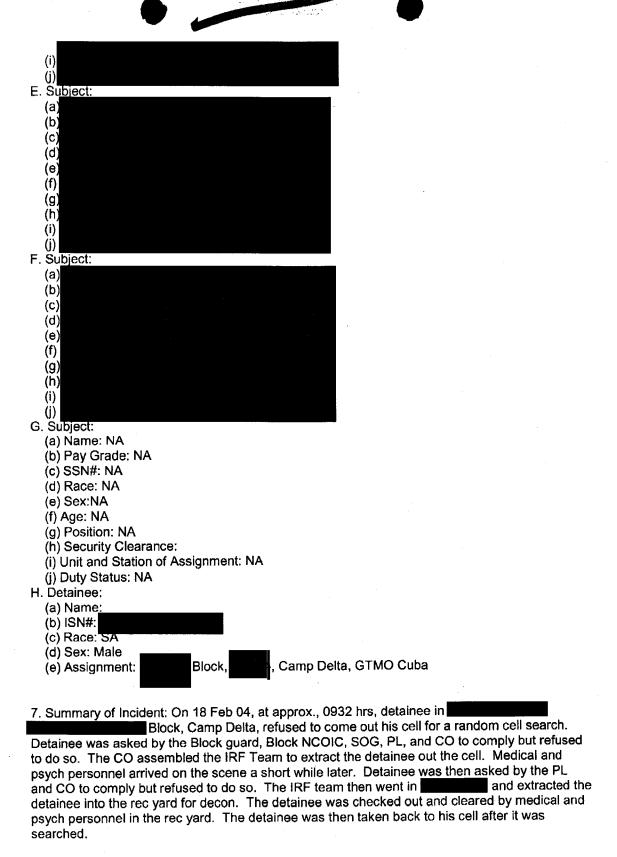
SIR 18 FEB 04 1. Category: N/A 2. Type of Incident: Serious Incident Report 3. Date/Time of Incident: 180932RFEB04 4. Location: Camp Delta, GTMO, Cuba 5. Other information: (a) Racial (Y/N): N (b) Trainee Involvement (Y/N): N 6. Personnel involved: A. Subject: (b) (c) (j) B. Subject: (a) (b) (c) (d) (e) (f) (g) (h) (i) (j) | C. Subject:

(a) (b) (c)

(j) D. Subject:
(a) (b) (c) (d) (e) (f) / (g)



- 8. Remarks: There were no injuries on the IRF team.
- 9. Publicity: N/A
- 10. Commander Reporting: MG Miller, CJTF-GTMO, Guantanamo Bay, Cuba



- 11. Point of Contact:
- 12. Downgrading Instructions: N/A

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or use of this form

190-45; the proponent agency is ODCSOPS

PRIVACY	ACT STAT	FMENT
CHIVALI		LIAIL IA I

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: DISCLOSURE:

Your social security number is used as an additional/alternate means of identification to facilitate filing and

Disclosure of your social security number is voluntary.

. LOCATION Block, Camp Delta, Guantanamo Bay Cuba 2. DATE (YYYYMMDD) منتها المريثين المرابين ومراملتن

4. FILE NUMBER

LAST NAME, FIRST NAME, MIDDLE NAME

6. SSN

7. GRADE/STATUS

8. ORGANIZATION OR ADDRESS

Military Police

Camp Delta, Guantanamo Bay Cuba 09360

3. TIME

9.

. WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

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10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF **PAG**

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT _

TAKEN AT _

DATED

MUST BE BE INDICATED. **DA FORM 2823, DEC 1998**

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THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUM

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	ry Police Compan	, Car	mp Delta, Guant	anamo Bay Cu	ba 09360	
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LAST NAME FIRST	NAME, MIDDLE NAME		6. SSN			DE/STATUS
	Guantanamo Bay C	uba zegu	4&51 8	1020H		
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OUTINE USES: DISCLOSURE:	To provide commandere	and law enforceme	ant officials with a		information ma	ly be accurately
PRINCIPAL PURPOSE: ROUTINE USES: DISCLOSURE:	Title 10 USC Section 301; To provide commanders	Title 5 USC Section	on 2951; E.O. 9397	dated Novemb	er 22, 1943 <i>(SS</i> information ma	N). ly be accurately
AUTHORITY: PRINCIPAL PURPOSE: ROUTINE USES: DISCLOSURE:	Title 10 USC Section 301;	Title 5 USC Sectio	on 2951; E.O. 9397	dated Novemb	er 22, 1943 <i>(SS</i>	N). ny be accurately

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

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AL	J I T.	JNI	11.

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 Your social security number is used as an additional/alternate means of identification to facilitate filing and

ROUTINE USES: DISCLOSURE:

Disclosure of your social security number is voluntary.

LOCATION Block, Camp Delta, Guantanamo Bay Cuba

2. DATE (YYYYM 2004, 62. 18 3. TIME

4. FILE NUMBER

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 OATH:

ON 13 FOR 2 DOUG OF CASH TRETERING WAS ENGLINE TO In Haraston Topas . E. E. France Latingal

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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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DA FORM 2823, DEC 1998

ORM 2823, JUN

USA

SWORN 190-45; the proponent agency is ODCSOPS For use of this for 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/affernate mean on to facilitate filing and **ROUTINE USES:** Disclosure of your social security number is volunta DISCLOSURE: 2. DATE (YYYYMMDD) 3. TIME 7 4. FILE NUMBER LOCATION Block, Camp Delta, Guantanamo Bay Cuba 20040218 7. GRADE/STATUS CT NAME FIRST NAME MIDDLE NAME 8. ORGANIZATION OR ADDRESS 277 Military Police Camp Delta, Guantanamo Bay Cuba 09360 On 13 February 2004 at 0932 refused to go to reservation as a verilt the alternate inf team was called in to do a for cell extraction. The extraction was complete with least amount of force necessary of each the also the New Enstructing the team. 111 Ent of Statement 111 . WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH: STATEMENT 11. INITIALS OF P 10. EXHIBIT PAGE 1 OF 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 NUM

DA FORM 2823, DEC 1998

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USA

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

PRIVACY	ACT S	TATEM	ENT

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 Your social security number is used as an additional/alternate means of identification to facilitate filing and

ROUTINE USES: DISCLOSURE:

Disclosure of your social security number is voluntary.

LOCATION

2. DATE (YYYYMMDD)

3. TIME

4. FILE NUMBER

Block, Camp Delta, Guantanamo Bay Cuba

7. GRADE/STATUS

8. ORGANIZATION OR ADDRESS

21774 Military Police Company

LAST NAME, FIRST NAME, MIDDLE NAME

Camp Delta, Guantanamo Bay Cuba 09360

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

ON 18 FEB 2004, AT ABOUT 0932 HICS DETAINES REFUSED TO LEAVE HIS call FOR RESELUTION, AT WHICH TIME THE CAMP COMMANDEL ORDERED A GOCK CELL EXTRACTION. I WAS THE

BY USING THE LEAST AMONT OF FORCE

NECESSARY THE DETAILES WAS PASSIVE THERE WORD NO INJURIOS TO THE DETADEE OR ANY TEAM MEMBER III END OF STATEMOND

10. EXHIBIT 11. INITIALS OF PERSON MAKING STATEMENT PAGE 1 OF TAKEN AT ____ DATED 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 MÜST BE BE INDICATED.