SIR  13 February 2004

1. Category: TBD

2. Type of Incident: Serious Incident Report

3. Date/Time of Incident: 131130R FEB04

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) TBD
   (b) TBD
   (c) TBD
   (d) TBD
   (e) TBD
   (f) TBD
   (g) TBD
   (h) TBD
   (i) TBD
   (j) TBD

B. Subject:
   (a) TBD
   (b) TBD
   (c) TBD
   (d) TBD
   (e) TBD
   (f) TBD
   (g) TBD
   (h) TBD
   (i) TBD
   (j) TBD

C. Subject:
   (a) TBD
   (b) TBD
   (c) TBD
   (d) TBD
   (e) TBD
   (f) TBD
   (g) TBD
   (h) TBD
   (i) TBD
   (j) TBD

D. Subject:
   (a) [Redacted]
1. (a) (b) (c) (d) (e) (f) (g) (h) (i)

Summary of Incident: On 13 Feb 04, at approximately 1130 hrs, detainee in [Redacted] refused to come out his cell and go to reservation. Detainee [Redacted] was asked by the Block guard, Block NCOIC, SOG, PL, and CO to comply but refused to do so. The CO assembled the IRF team to extract the detainee out the cell. Medical and psych personnel arrived on the scene a short while later. Detainee was then asked by the PL and CO to comply but refused to do so. The IRF team then went in [Redacted] and extracted detainee [Redacted] into the rec yard for [Redacted]. The detainee was checked out and cleared by medical and psych personnel in the rec yard. The detainee was then taken to reservation.

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: [Redacted]

12. Downgrading Instructions: N/A
WORN 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
   Block, Camp Delta, Guantanamo Bay Cuba

2. DATE (YYYYMMDD)
   2001/02/13

3. TIME
   12:00

4. FILE NUMBER

5. LAST NAME FIRST NAME MIDDLE NAME

6. SSN

7. GRADE/STATUS

S. ORGANIZATION OR ADDRESS
   Military Police
   COMPANY
   Camp Delta, Guantanamo Bay Cuba 09360

I, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

ON 13 FEBRUARY 2001 AT APPROXIMATELY 11:35 HRS, DETAINEE(S) IN CELL
CELL [REDACTED] ISN# [REDACTED] REFUSED BLOCK GUARD, BLOCK N
CAMP SOG, CAMP PL AND CAMP COMMANDER TO COMPLY WITH REQUIREMENT
FOR HIM TO GO TO RESERVATION. THE DETAINEE WAS GIVEN
THROUGH [REDACTED] FOR IMMEDIATE RESPONSE OF THE IRF TEAM. I
WAS A MEMBER OF THE PRIMARY IRF TEAM [REDACTED], WITH
MINIMUM AMOUNT OF FORCE NECESSARY, THE TEAM ENTERED INTO CELL
RESTRAINED AND CREDITED THE DETAINEE AND MOVED THE DETAINEE TO THE RECREATION AREA WHERE HE RECEIVED MEDICAL ATTENTION AND
EVALUATION. THE FOLLOWING DETAINEE(S) HAVE ALSO HERED:

END OF STATEMENT

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

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

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BE INDICATED.

DA FORM 2823, DEC 1998

DA FORM 2823, JUL 72, IS OBSOLETE
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.

LOCATION Block, Camp Delta, Guantanamo Bay Cuba

EXACT LAST NAME FIRST NAME MIDDLE NAME

ORGANIZATION OR ADDRESS Military Police CO

FILE NUMBER

DATE 04 02 13

TIME 1155

FILE NUMBER

GRADUATE STATUS

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

ON 13 FEB 2004 AT APPROXIMATELY 1135 HRS DETAINEE(S) IN CELL...

CAMP S 61, CAMP PL AND CAMP COMMANDER TO COMPLY WITH REQUIREMENT

FOR HIM TO GO TO RESERVATION... THE.. WAS GIVEN

THROUGH FOR IMMEDIATE RESPONSE OF THE IRF TEAM. I

WAS A MEMBER OF THE PRIMARY IRF TEAM, WITH T

MINIMUM AMOUNT OF FORCE NECESSARY, THE TEAM ENTERED INTO CEI

THE DETAINEE AND MOVED THE DETAINEE TO THE RECREATION AREA WHERE HE RECEIVED MEDICAL ATTENTION AN

EVALUATION... DETERMINED DETAINEE WHERE ALSO IRF

End of Statement!!!
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 additonal/alternate means of identification to facilitate filing and re
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION
Block, Camp Delta, Guantanamo Bay Cuba

2. DATE (YYYYMMDD)
20040813

3. TIME
1155

4. FILE NUMBER

5. NAME

6. SSN

7. GRADE/STATUS

8. ORGANIZATION OR ADDRESS
7-3 N Military Police CO, Camp Delta, Guantanamo Bay Cuba 09360

I WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

ON 13FEB04 AT APPROXIMATELY 1135 HRS, DETAINEE(S) IN CELL
CELL ISN# [REDACTED] REFUSED BLOCK GUARD, BLOCK N
CAMP SOG, CAMP PL AND CAMP COMMANDER TO COMPLY WITH REQUIREMENT
FOR HIM TO RECALIBRATION. THE [REDACTED] WAS GIVEN
THROUGH [REDACTED] FOR IMMEDIATE RESPONSE OF THE IRF TEAM. I
WAS A MEMBER OF THE IRF TEAM WITH [REDACTED] MINIMUM AMOUNT OF FORCE NECESSARY, THE TEAM ENTERED INTO CE
[REDACTED] THE DETAINEE AND MOVED THE DETAINEE TO THE RECREATION AREA WHERE HE RECEIVED MEDICAL ATTENTION AND
EVALUATION. THE FOLLOWING DETAINEE(S) WHERE ALSO TREATED:

[REDACTED]

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 1
MUST BE INDICATED.

DA FORM 2823, DEC 1998
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   Block, Camp Delta, Guantanamo Bay Cuba

2. DATE YYYYMMDD   20040413

3. TIME 1130

4. FILE NUMBER 1

5. LAST NAME, FIRST NAME, MIDDLE NAME

6. SSN

7. GRADE/STATUS

8. ORGANIZATION OR ADDRESS

273 Military Police Company

Camp Delta, Guantanamo Bay Cuba 09360

WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

ON Feb 13, 04, AT APPROXIMATELY 1135 HRS, DETAINEE(S) IN CELL CELL 445, CAMP SGC, CAMP PL AND CAMP COMMANDER TO COMPLY WITH REQUIREMENT

FOR HIM TO RESEARCH. THE WAS GIVEN THROUGH FOR IMMEDIATE RESPONSE OF THE IRF TEAM. I

WAS A MEMBER OF THE PRIMARY IRF TEAM, WITH A MINIMUM AMOUNT OF FORCE NECESSARY, THE TEAM ENTERED INTO CELL

TO THE RECREATION AREA WHERE HE RECEIVED MEDICAL ATTENTION AND EVALUATION. THE FOLLOWING DETAINERS also IREED

111

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 BE THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE N
MUST BE INDICATED.

DA FORM 2823, DEC. 1998
WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH ON 2004 Feb 13 AT APPROXIMATELY 11:35 HRS. DETAINEE(S) IN CELL CAMP SOS, CAMP PL AND CAMP COMMANDER TO COMPLY WITH REQUIREMENTS FOR IMMEDIATE RESPONSE OF THE IRF TEAM. I WAS A MEMBER OF THE PRIMARY IRF TEAM WITH MINIMUM AMOUNT OF FORCE NECESSARY, THE TEAM ENTERED INTO CELL CAMP SOS, CAMP PL AND MOVED THE DETAINEE TO THE RECREATION AREA WHERE HE RECEIVED MEDICAL ATTENTION AND EVALUATION. THE TOUCHE DETAINERS WHERE ALSO TREATED.

End of Statement