STATEMENT OF	_ TAKEN AT Haswah	DATED 18 Feb 05
9. STATEMENT (Continued)		
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		Person Making Statement)
WITNESSES:		before me, a person authorized by law to
4		H day of FEBRUARY, 2005
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INITIALS OF PERSON MAKING STATEMENT		PAGE 3 OF 3 PAGES

PAGE 3, DA FORM 2823, DEC 1998

	SWORN STATEMENT se AR 190-45; the proponent agency is ODCSOPS	Q
AUTHORITY: Title 10 USC Section 301; Title 5 PRINCIPAL PURPOSE: To provide commanders and law e ROUTINE USES: Your social security number is use DISCLOSURE: Disclosure of your social security r	RIVACY ACT STATEMENT USC Section 2951; E.O. 9397 dated November is enforcement officials with means by which informed as an additional/alternate means of identification number is voluntary.	22, 1943 <i>(SSN).</i> nation may be accurately identified. on to facilitate filing and retrieval.
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8. ORGANIZATION OR ADDRESS	6. SSN	7, GRADE/STATUS
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DA FORM 2823, DEC 1998

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STATEMENT OF TAKEN AT HATIS BOSE	DATED
9. STATEMENT (Continued)	V-70
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INITIALS OF PERSON MAKING STATEMENT	
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ETIP ZII ACR TF 155 AL Hasawa Ima	Subscribed and sworn to before me, a person authorized by law to administer oaths, this 18TH day of FERMAN, 1205 at HASWAN PATAL BASE, IMAR
ORGANIZATION OR ADDRESS	(Signature of Person Administering Oath)
	(Typed Name of Person Administering Oath)
	COMMISSIONED OFFICER
ORGANIZATION OR ADDRESS	(Authority To Administer Oaths)
INITIALS OF PERSON MAKING STATEMENT	PAGE OF 3 PAGES

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	roi use of this joi		t agency is ODCSOP:	· · · · · · · · · · · · · · · · · · ·	
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10. EXHIBIT		11. INITIAL OF PERSON M.	AKING STATEMENT	PAGE 1 OF _3	_ PAGES
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STATEMENT OF TAKE	EN AT Haswah PB Iray DATED
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9. STATEMENT (Continued)	
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BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORP	UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE
CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT	FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT
THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFU	L INFLUENCE, OR UNLAWFUL INDUCEMENT.
·	Signature of Person Making Statement)
	(Signature of Person Making Statement)
WITNESSES:	Subscribed and sworn to before me, a person authorized by law to
	administer oaths, this 18 TH day of FEBRUARY , 2005
ETRP Y'll ACK	at Hiswall Person Biss, and
Hosey Royal Buse, IRa	
ORGANIZATION OR ADDRESS	Signature of Person Administering Oath)
	(Typed Name of Person Administering Oath)
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ORGANIZATION OR ADDRESS	(Authority To Administer Oaths)
INITIALS OF PERSON MAKING STATEMENT	PAGE 3 OF 3 PAGES

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V		SWORN STATEMENT			
For use of this form, see AR 190-45; the proponent agency is ODCSOPS					
		PRIVACY ACT STATEMENT		<u> </u>	
AUTHORITY:		ection 2951; E.O. 9397 dated November 22, 1			
PRINCIPAL PURPOSE:	To provide commanders and law enforcem	ment officials with means by which information	on may be accurately identified	d.	
ROUTINE USES:	Your social security number is used as an	n additional/alternate means of identification to	a facilitate filing and retrieval.		
DISCLOSURE:	Disclosure of your social security number	is voluntary.			
1. LOCATION Al Haswa		2. DATE (YYYYMMDD) 2005021 8	3. TIME 2350	4. FILE NUMBER	
5. LAST NAME, FIRST NAME, M.	IDDLE NAME	6. SSN		7. GRADE/STATUS	
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STATEMENT OF	TAKEN AT AI HOSWON DATED 18 Febos
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	AFFIDAVIT
HICH BEGINS ON PAGE 1, AND ENDS ON PAGE	, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT
BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTION	3 I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE NS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS
STATEMENT PREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOU	JT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.
,	2
,	(Signature of Person Making Statement)
· · · · · · · · · · · · · · · · · · ·	Subscribed and sworn to before me, a person authorized by law to
	administer oaths, this 16 day of FEB 2008
Talle To Talle	at HASWAY BATROL BASE, IRAA
ORGANIZATION OR ADDRESS	(Signature of Person Administering Oath)
	(Typed Name of Person Administering Oath)
ORGANIZATION OR ADDRESS	U.S. Arms officer
	(Authority To Administer Oaths)
INITIALS OF PERSON MAKING STATEMENT	PAGE 3 OF 3 PAGES
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