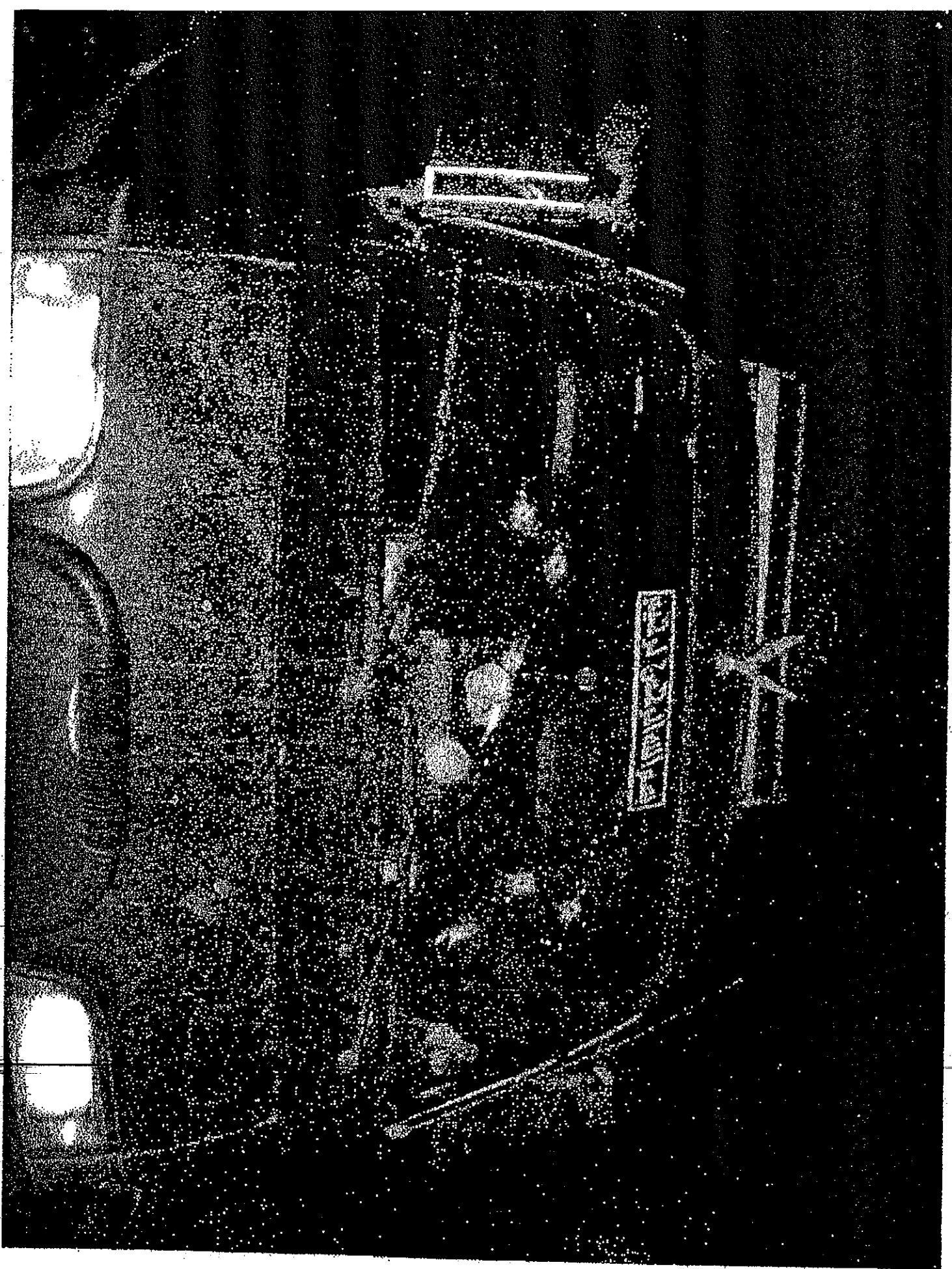
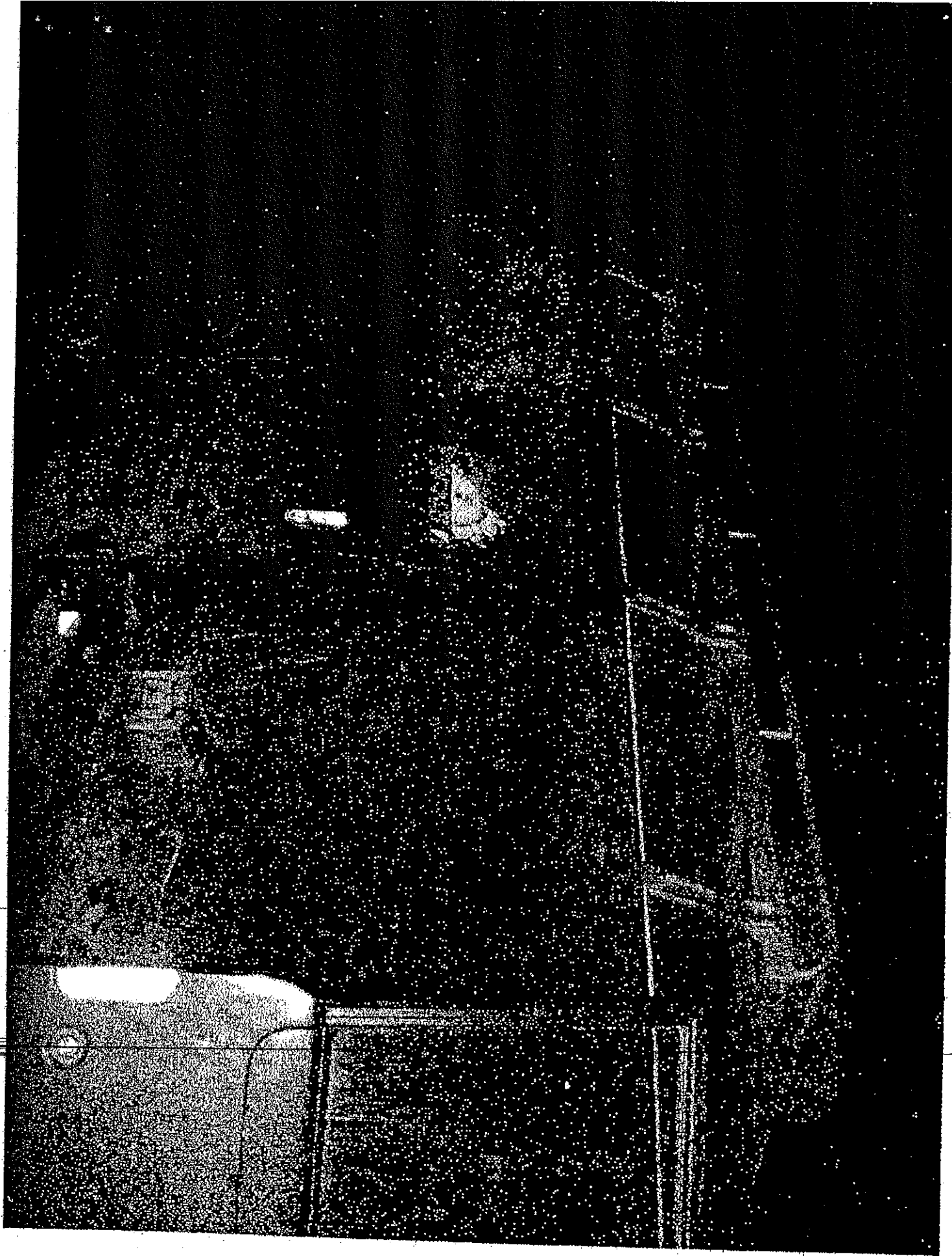
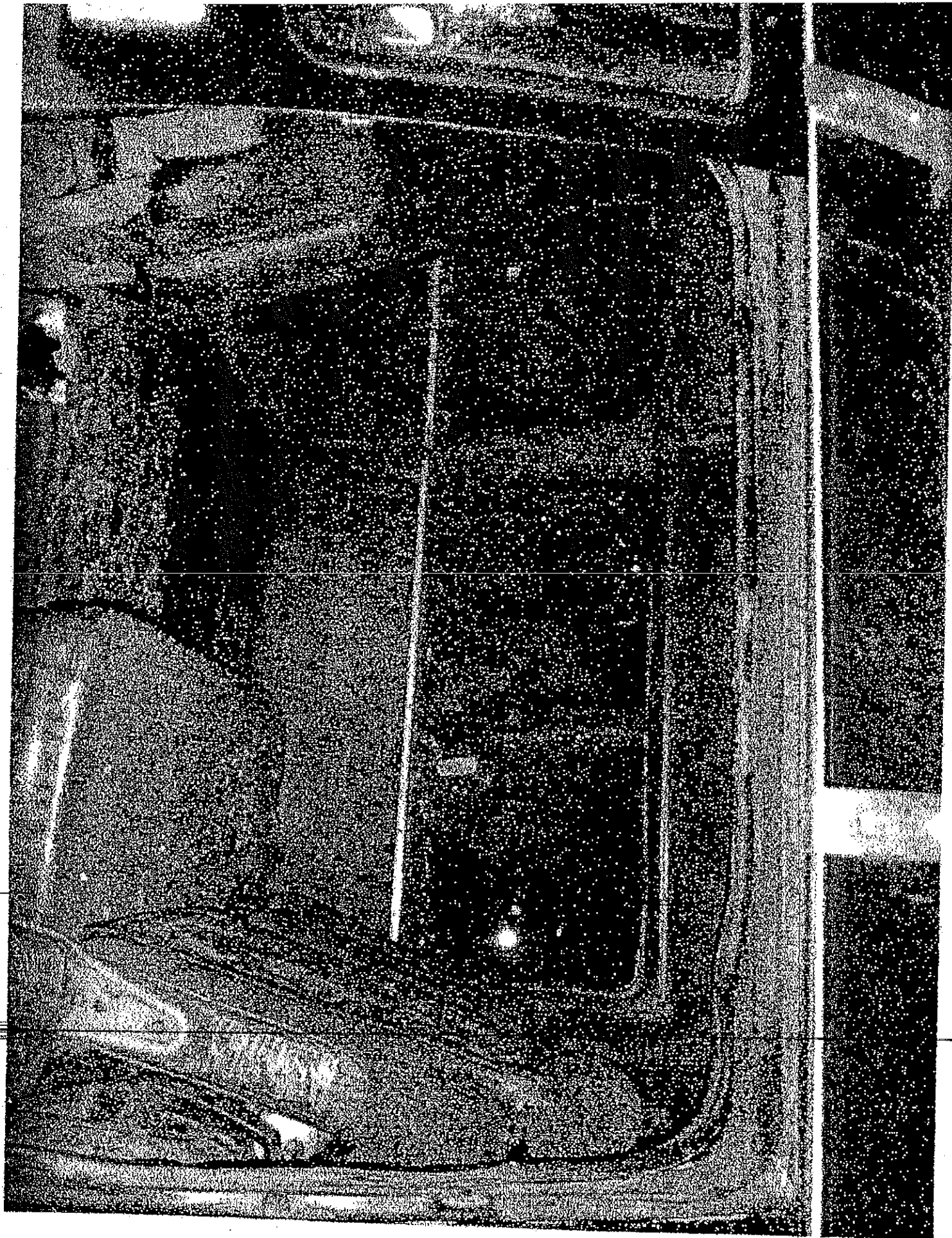




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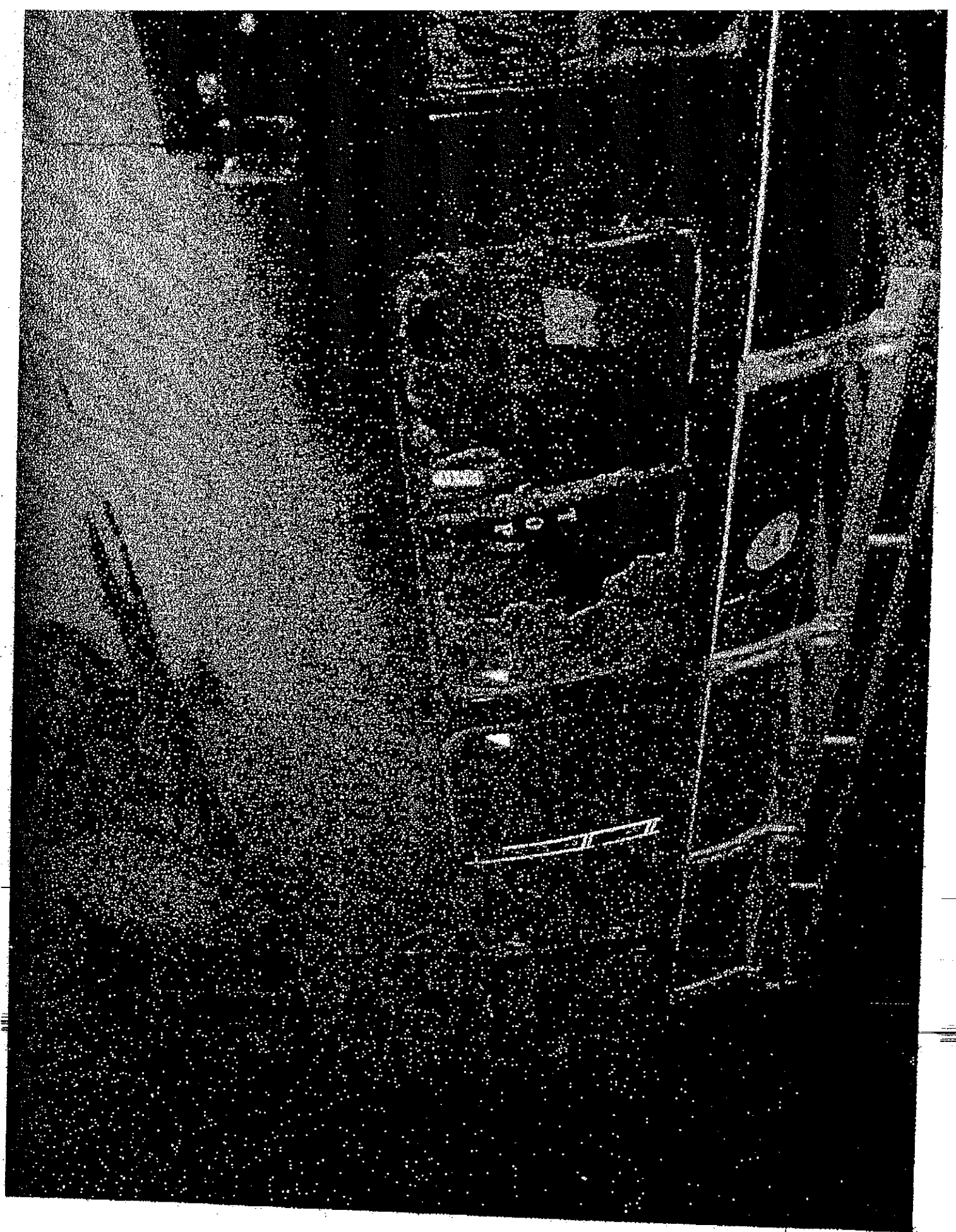




Exhibit C

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 identified.
ROUTINE USES: Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.
DISCLOSURE: Disclosure of your social security number is voluntary.

1. LOCATION
A CO. TARE
2. DATE (YYYYMMDD)
2006 04 18
3. TIME
10:00
4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME
[REDACTED]
6. GRADE/STATUS
E-2 / PFC
7. ORGANIZATION OR ADDRESS
A CO. 1-502 IN

8. I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On the 17th April 2006, At around 2135 during a barrier emplacement mission. A van starting driving towards us as we were pulling security. The gunner saw the vehicle coming so he warned us. As the vehicle started get closer at around 75 meters away my NCOIC to the right of me started to wave his ~~spotlight~~ and shouting STOP. The van did not stop but it started to pick up speed. Then the NCOIC fired one warning shot. And the vehicle still kept coming so he yelled to FIRE! And the Gunner, the NCOIC and I opened fire until the vehicle had stopped about 25 meters away. I shot approximately 10 rounds and the same with my NCOIC. The Gunner shot around 20 rounds. I received a brief on ROE before we reached the security point.

Nothing follows

10. EXHIBIT

11. INITIALS OF PERSON MAKING STATEMENT

PAGE 1 OF 3 PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF _____ 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.

STATEMENT OF [REDACTED] TAKEN AT A. CO. TOC DATED 2006 04 18

9. STATEMENT (Continued)

ALL ITEMS ARE REDACTED
UNDER 5USC(B)(6)
UNLESS OTHERWISE NOTED

nothing follows

INITIALS OF PERSON MAKING STATEMENT [REDACTED]

PAGE 2 OF 3 PAGES

9. STATEMENT (Continued)

ALL ITEMS ARE REDACTED
UNDER 5 USC (B) (6)
UNLESS OTHERWISE NOTED

nothing follows

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 3. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

[REDACTED]
(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this _____ day of _____ at _____

[REDACTED]
(Signature of Person Administering Oath)

[REDACTED]
(Typed Name of Person Administering Oath)

[REDACTED]
(Authority To Administer Oaths)

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

PAGE 3 OF 3 PAGES

Exhibit D