

Freedom of Information Act Exemption Number b and 3

**RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE**

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

**DATA REQUIRED BY THE PRIVACY ACT**

**AUTHORITY:** Title 10, United States Code, Section 3012(g)  
**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 CAMP ANIFTON, KWANG	2. DATE 3 FEB 2005	3. TIME 1042 HRS	4. FILE NO.
5. NAME (Last, First, MI) [REDACTED]	8. ORGANIZATION OR ADDRESS 308TH TRANSPORTATION COMPANY APO AE 09366		
6. SSN [REDACTED]	7. GRADE/STATUS O-3		

**PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE**

**Section A. Rights**

The investigator whose name appears below told me that he/she is with the United States Army 106TH TC BN and wanted to question me about the following offense(s) of which I am suspected/accused: DEATH OF INAD CHILD

Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- I do not have to answer any question or say anything.
- Anything I say or do can be used as evidence against me in a criminal trial.
- (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. This lawyer can be a civilian lawyer I arrange for at no expense to the Government or a military lawyer detailed for me at no expense to me, or both.  
 - or -  
 (For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. I understand that this lawyer can be one that I arrange for at my own expense, or if I cannot afford a lawyer and want one, a lawyer will be appointed for me before any questioning begins.
- If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

**Section B. Waiver**

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (If available)		3. SIGNATURE OF INTERVIEWEE [REDACTED]	
1a. NAME (Type or Print) [REDACTED]		4. SIGNATURE OF INVESTIGATOR [REDACTED]	
b. ORGANIZATION OR ADDRESS AND PHONE 308th Transportation Company		5. TYPED NAME OF INVESTIGATOR [REDACTED]	
2a. NAME (Type or Print) [REDACTED]		6. ORGANIZATION OF INVESTIGATOR 106TH TRN BN	
b. ORGANIZATION OR ADDRESS AND PHONE 308TH TC Camp Anifon, Kwang APO AE 09366			

**Section C. Non-waiver**

- I do not want to give up my rights  
 I want a lawyer  I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

Exhibit J

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
  - a. Your official position.
  - b. Nature of offense(s).
  - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:

"Before I ask you any questions, you must understand your rights."

  - a. "You do not have to answer my questions or say anything."
  - b. "Anything you say or do can be used as evidence against you in a criminal trial."
  - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

(For civilians not subject to the UCMJ) You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (i.e., fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)

SPECIAL INSTRUCTIONS

WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE: If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY: In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

PRIOR INCRIMINATING STATEMENTS:

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advice.

NOTE: If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS: If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

Exhibit J.

# Freedom of Information Act Exemption Number 6 and 3

## 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 retrieval.  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION Camp Arifjan, Kuwait	2. DATE (YYYYMMDD) 20050203	3. TIME 1045	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS E-3	
8. ORGANIZATION OR ADDRESS 308th TC APO AE 09360			

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

I WAS NOTIFIED BY THE UNIT TRUCEMASTER THAT ONE OF OUR COMRADES THAT WAS APPROX. 24 MILES SOUTH OF SPAIN WAS AN IRAQI CHILD RUN OUT UNDER ONE OF THE TAILORS OF OUR CONVOY, AND WAS KILLED. [REDACTED] INFORMED ME THAT THE CONVOY ELEMENT PLATFORM WAS VIDEO TAPING THE AREA FOR FURTHER TTP's. AND WAS VIDEO TAPED THE INCIDENT AT WHICH TIME I WENT TO THE 354th TC BN. TOC AND INFORMED THE BATTALION COMMANDER [REDACTED] OF THE INCIDENT, [REDACTED] WAS PRESENT WHEN I WAS INFORMING THE BATTALION COMMANDER. AT WHICH TIME WE SUBMITTED AN SIB TO BATTALION. I INFORMED SFC REBERTS TO ENSURE THE CONVOY COMMANDER SUBMITTED AS MUCH INFORMATION BACK TO US AS THEY COULD GET, AND TO MONITOR [REDACTED] AND SEEK ANY ASSISTANCE AT THE CSCS IN IRAQ TO ALLOCATE ANY ISSUES THAT MAY ARISE FROM THE INCIDENT. (COMBAT STRESS TRAINS, CHALLENGES).

NOTHING FOLLOWS

TSS

TSS

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 3 PAGES
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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 NUMBER MUST BE INDICATED.

Freedom of Information Act Exemption Number 3a(1) b

STATEMENT OF [REDACTED] TAKEN AT CAMP AMERIAN, KUWAIT DATED 3 FEB 2005

9. STATEMENT (Continued)

[REDACTED]

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:

[REDACTED]  
306th TC Camp Arifjan, KU  
ORGANIZATION OR ADDRESS

[REDACTED]  
354 TRANS BN, CAMP AMERIAN, KUWAIT  
ORGANIZATION OR ADDRESS

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 3 day of FEB, 2005 at Camp Arifjan, KU

[REDACTED]  
(Signature of Person Administering Oath)

[REDACTED]  
(Typed Name of Person Administering Oath)

[REDACTED] USA  
(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

TSS

PAGE 3 OF 3 PAGES

Freedom of Information Act Exemption number 9 and b

USE THIS PAGE IF NEEDED. IF THIS PAGE IS NOT NEEDED, PLEASE PROCEED TO FINAL PAGE OF THIS FORM.

STATEMENT OF [REDACTED] TAKEN AT CAMP ANJIAN, KUANT DATED 2 Feb 2005

9. STATEMENT (Continued)

Q: What was your job on the date of the incident?

A: Company Counsel

Q: [REDACTED]

Q: Did you see the incident?

A: NO.

A: [REDACTED]

Q: What happened the day of the incident?

A: NOT ASKED.

Q: Where there any enemy contact during the convoy?

A: NONE.

Q: What time did you wake up and SP?

A: NOT ASKED.

Q: Where you tired?

A: NOT ASKED.

Q: Where there any stops before or after the accident?

A: NOT ASKED.

Q: What were the road conditions and was anyone else on the road?

A: NOT ASKED.

Q: What speed where you traveling?

A: NOT ASKED.

Q: Where where you located at the time of the incident?

A: COMPANY TDC AT CAMP ANJIAN, KU.

Q: What was going on in the Cab of the truck before during and after the incident?

A: NOT ASKED.

Q: Did you see the child involved in the incident and if so what was he doing?

A: NOT ASKED.

Q: What happened after the incident?

A: NOTIFIED THE BN 53 + BC OF THE INCIDENT, SEE STATEMENT.

Q: Did you alter the Video?

A: NEVER HAD THE VIDEO IN YOUR POSSESSION.

Q: who is [REDACTED]

A: 308th Truck Master.

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 2 PAGES

Exhibit T

# Freedom of Information Act Exemption Number 6 and 3

## SWORN STATEMENT

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

### PRIVACY ACT STATEMENT

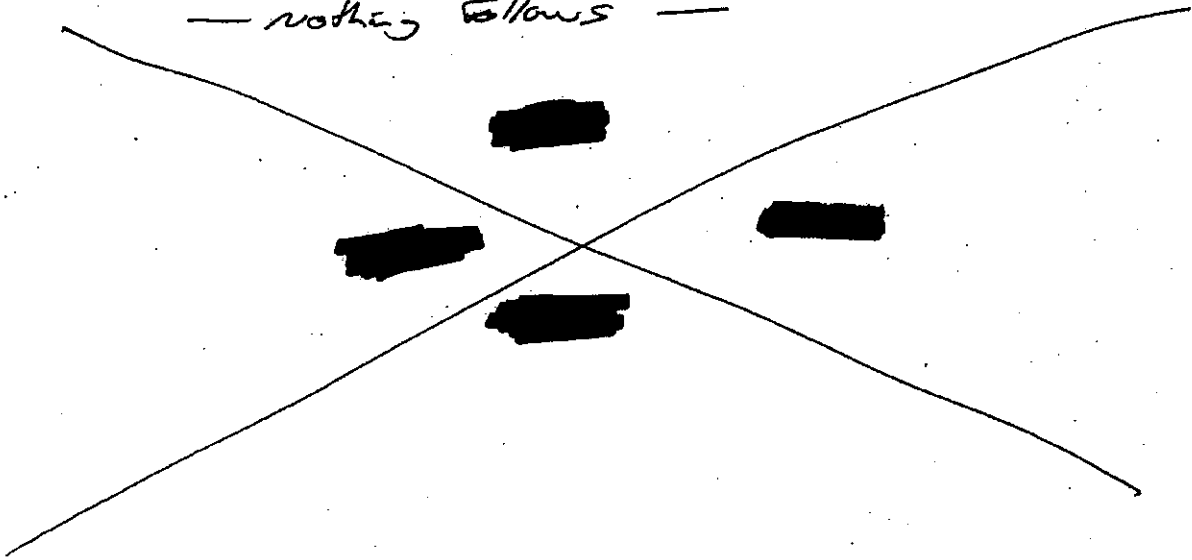
**AUTHORITY:** Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).  
**PRINCIPAL PURPOSE:** To provide commanders and law enforcement officials with means by which information may be accurately  
**ROUTINE USES:** Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION <i>Camp Arifjan Kuwait</i>	2. DATE (YYYYMMDD) <i>20050207</i>	3. TIME <i>1526</i>	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]		6. SSN [REDACTED]	
7. GRADE/STATUS <i>CPT/AD</i>			
8. ORGANIZATION OR ADDRESS <i>70th Trans Co, 354th Trans Bn</i>			

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

*On 25 Jan 05 I was in the 308th Co TOC working on my TOA Brief. [REDACTED] asked me to step outside so he could talk to me. Once outside he told me one of his drivers ran over a kid in Iraq and [REDACTED] was his TC. I then asked him if they were ok and if everything was alright. He told me they did not even know they ran over and killed the kid. He then told me the escort company caught the incident on film and informed the drivers after the fact, I then began to ask on the mental condition of the soldiers, he informed me everything was ok and they are not having any immediate issues.*

*— nothing follows —*



10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF <u>3</u> PAGES
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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 NUMBER MUST BE INDICATED.

*E.I. of K to 25 JAN 05 AR 15-6 J18216*

Freedom of Information Act Exemptions number 3 and b

USE THIS PAGE IF NEEDED. IF THIS PAGE IS NOT NEEDED, PLEASE PROCEED TO FINAL PAGE OF THIS FORM.

STATEMENT OF [REDACTED] TAKEN AT Camp Arifan DATED 7 Feb. 05

9. STATEMENT (Continued)

Q: What was your job at the time of the incident?

A: Company Computer TOTEM CO.

Q: [REDACTED]  
A: [REDACTED]

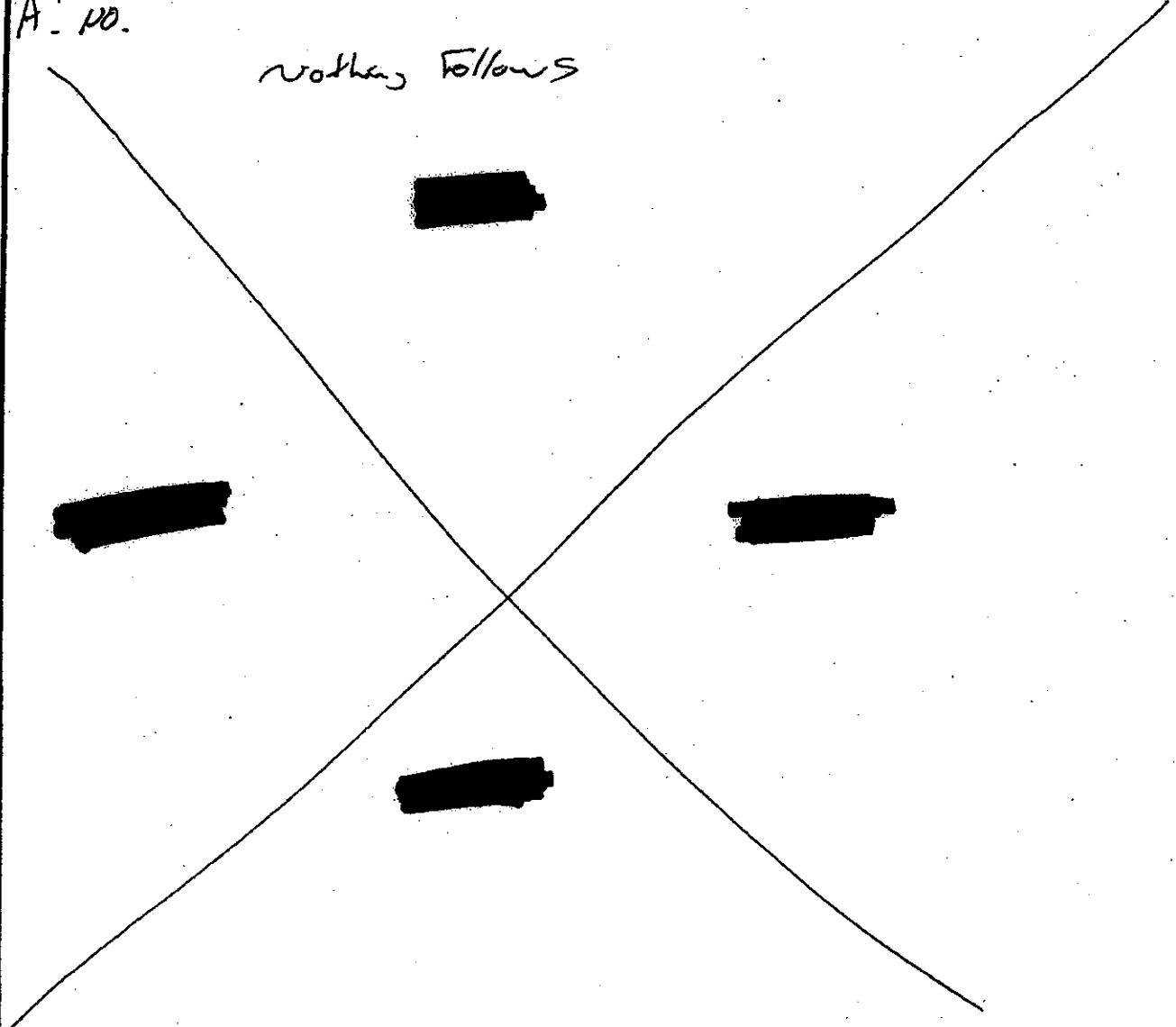
Q: Did you see the DVD?

A: NO

Q: Have you physically had possession of the DVD?

A: NO

Nothing follows



INITIALS OF PERSON MAKING STATEMENT [REDACTED]

PAGE 2 OF 3 PAGES

Exhibit K

STATEMENT OF [REDACTED] TAKEN AT Camp Arifan DATED 7 Feb 05

9. STATEMENT (Continued)

[REDACTED]

AFFIDAVIT

[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:

[REDACTED]  
308th TC  
Camp Arifan, Kuwait APO AE 09366  
ORGANIZATION OR ADDRESS  
[REDACTED]  
7016 Tans CO  
Camp Arifan - Kuwait APO AE 09366  
ORGANIZATION OR ADDRESS

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 7 day of FEB, 2005 at 1028 Camp Arifan, KU

[REDACTED]  
(Signature of Person Administering Oath)

[REDACTED]  
(Typed Name of Person Administering Oath)

[REDACTED] USA  
(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT  
T.G.Z.

Exhibit K



# Freedom of Information Act Exemption Number 6 and 3

## 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 retrieval.  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION Camp Arifjan, Kuwait	2. DATE (YYYYMMDD) 2005 02 03	3. TIME 0900	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS O-4	
8. ORGANIZATION OR ADDRESS 354 <sup>th</sup> Trans Bn APO AE 09366			

9. I, [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:  
I received word through an SIR from the 908<sup>th</sup> TC that an Iraqi child was struck by one of our trucks from the 308<sup>th</sup> TC. [REDACTED]  
[REDACTED], the company commander of the 308<sup>th</sup> TC, came into the 354<sup>th</sup> Trans Bn TOC and briefed me and [REDACTED] verbally on the incident. From what I was briefed, the Iraqi child was standing on the side of the road with a lot of dust being kicked up. The Iraqi child came through the dust into the road and was struck by the truck. I was informed that there was a video of the incident. I coordinated with [REDACTED] from 1-178<sup>th</sup> to ensure [REDACTED] received the video.

*End of Statement*

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 3 PAGES
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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 NUMBER MUST BE INDICATED.

Ed + L to 25 JAN 05 to AIG-18149

Freedom of Information Act Exemption Number 3 and b

USE THIS PAGE IF NEEDED. IF THIS PAGE IS NOT NEEDED, PLEASE PROCEED TO FINAL PAGE OF THIS FORM.

STATEMENT OF \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_

9. STATEMENT (Continued)

~~What was your job for?~~

Q: What was your job at the time of the incident?

A: 354th TRANS BN S-3 officer

Q: What unit(s) was/were involved?

A: 308th TC with soldiers right seat riding from the 70th TC

Q: Who was the Convoy Commander

A: [REDACTED]

Nothing follows [REDACTED]

INITIALS OF PERSON MAKING STATEMENT [REDACTED]

PAGE 2 OF 3 PAGES

Freedom of Information Act Exemption Number 2a-d6

STATEMENT OF [REDACTED] TAKEN AT 0900 DATED 3 Feb 2005

9. STATEMENT (Continued)

[REDACTED]

AFFIDAVIT

I, Allen James Joyner, 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 3 day of FEB, 2005 at BLOG 5, CAMP ARIFIAN KUWAIT

[REDACTED]  
483rd TRANS BN

ORGANIZATION OR ADDRESS

[REDACTED]  
483rd TRANS BN

ORGANIZATION OR ADDRESS

[REDACTED]  
(Signature of Person Administering Oath)

[REDACTED]  
(Typed Name of Person Administering Oath)

[REDACTED] USA  
(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE 3 OF 3 PAGES

Freedom of Information Act Exemption Number 3 and 6

SWORN STATEMENT

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PRIVACY ACT STATEMENT

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1. LOCATION <i>Camden, Kuwait</i>	2. DATE (YYYYMMDD) <i>2005 FEB 03</i>	3. TIME <i>1842</i>	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS <i>E9</i>	
8. ORGANIZATION OR ADDRESS <i>354 TC BN</i>			

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

I arrived at BN Toc for regular shift at 1545 on 25 Jan 05. Day Battle Captain told me about an SIR from 308th involving civilian child hit by convoy. I was advised that it was not being discussed publicly due to sensitive nature.

Later, 7th Group Btl Cpt, [REDACTED] called. He asked for info not on initial sir. He asked for more detail on how it happened and how it happened that the escort was videotaping at the time of accident.

I asked 308 CO to get Convoy Cdr on phone & ask him to call me. CO was unable to contact convoy cdr.

I emailed [REDACTED] to advise.

Throughout shift, until I departed shift, unable to contact Convoy cdr.

End of Statement

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF <i>1</i> PAGES
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Limit to 75 Jan 05 AR 15-1, Investigation 18122

Freedom of Information Act Exemption 7 and b

STATEMENT OF \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATED \_\_\_\_\_

9. STATEMENT (Continued)

Q: What was your Job at the time of the Incident?

Q: [REDACTED]

A: NIGT Battle Captain;

A: [REDACTED]

Q: Since this report (encl) you have not been involved at all?

A: That is correct.

Q: Whom else is involved that you know of?

A: None other than already listed on POL List;

[REDACTED SECTION]

AFFIDAVIT

I, [REDACTED], HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 2. 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:

[REDACTED]

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 3 day of FEB . 05 at CAP AIR FORCE [REDACTED]

[REDACTED] (Signature of Person Administering Oath)

[REDACTED]

[REDACTED] (Authority To Administer Oaths)

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 2 PAGES

Freedom of Information Act Exemption Numbers 3 and b

SWORN STATEMENT

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PRIVACY ACT STATEMENT

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1. LOCATION Camp Arifjan Kuwait	2. DATE (YYYYMMDD) 20050203	3. TIME 10:50	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS SFC/E-7	
8. ORGANIZATION OR ADDRESS 308th TC Camp Arifjan, Kuwait APO AE 09366			

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

on the date in question I received an initial report of the incident and initiated the SIR to be forwarded to the BN. later on in the evening the Convoy Commander called and gave me more exact details of the incident in which I completed & sent an updated SIR report to the BN. The Convoy Commander while he was on the phone told me that he had viewed the tape and it appeared to him that the Iraqi child leaned through a dust cloud into the M812 trailer & that the driver was unaware of the incident until the arrival at the next CSC (Convoy Support Center) for the night stay. The Convoy Commander [REDACTED] also stated to me that the Escort Commander made the call to keep the Convoy rolling and no medivac was called due to it was closer to have the civilians take him to the hospital I a Najaf than to wait for medivac.

Nothing Follows

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF 3 PAGES
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# Freedom of Information Act Exemption Number 3 and 6

USE THIS PAGE IF NEEDED. IF THIS PAGE IS NOT NEEDED, PLEASE PROCEED TO FINAL PAGE OF THIS FORM.

STATEMENT OF [REDACTED] TAKEN AT Arifjan, KV DATED 20050203

## 9. STATEMENT (Continued)

Q: What was your job on the date of the incident?

A: ASST: TRUCK MASTER

Q: [REDACTED]

Q: Did you see the incident?

A: NO.

A: [REDACTED]

Q: What happened the day of the incident?

A: Normal Convoy ops.

Q: Where there any enemy contact during the convoy?

A: NOT ASKED (NA)

Q: What time did you wake up and SP?

A: N/A

Q: Where you tired?

A: N/A

Q: Where there any stops before or after the accident?

A: STOPPED AT CSC SCMTA AFTERWARD.

Q: What were the road conditions and was anyone else on the road?

A: N/A

Q: What speed were you traveling?

A: N/A

Q: Where were you located at the time of the incident?

A: 308th TR Camp Arifjan

Q: What was going on in the Cab of the truck before during and after the incident?

A: N/A

Q: Did you see the child involved in the incident and if so what was he doing?

A: N/A

Q: What happened after the incident? Did BU give any instructions

A: Submit follow up SIR & NO ONE WAS TO GET VIDEO UNTIL IT GOT BACK

Q: Did you <sup>to the ship</sup> after the video?

A: NO, DID NOT TOUCH IT.

Q: Did you see the video.

A: NO, DON'T CARE.

INITIALS OF PERSON MAKING STATEMENT

[REDACTED]

PAGE 2 OF 3 PAGES

Freedom of Information Act Exemption Number 3 and b

STATEMENT OF [REDACTED] TAKEN AT Arifson, Ku DATED 20050203

9. STATEMENT (Continued)

[REDACTED]

AFFIDAVIT

[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 3 day of FEB, 05 at CAMP ARIFSON, KU

[REDACTED]  
(Signature of Person Administering Oath)

[REDACTED]  
(Typed Name of Person Administering Oath)

[REDACTED] USJ  
(Authority To Administer Oaths)

[REDACTED]  
CAMP ARIFSON, KUWAH 09366  
ORGANIZATION OR ADDRESS

[REDACTED]  
354 TRANS BN  
APO AE 09366  
ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT [REDACTED]

PAGE 3 OF 3 PAGES

E.I.L. + N



Freedom of Information Exemption Number 7 and b

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
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: Camp Arifjan, Kuwait
2. DATE: 09050203
3. TIME: 10:45
4. FILE NO.
5. NAME (Last, First, MI)
6. ORGANIZATION OR ADDRESS: 308th TC, Camp Arifjan, Kuwait, APO AE 09366
7. GRADE/STATUS: SFC/E-7

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army 106th Trans BN and wanted to question me about the following offense(s) of which I am

suspected/accused: Death of an Iraqi Child

Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. This lawyer can be a civilian lawyer I arrange for at no expense to the Government or a military lawyer detailed for me at no expense to me, or both.

- or -

(For civilians not subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning. I understand that this lawyer can be one that I arrange for at my own expense, or if I cannot afford a lawyer and want one, a lawyer will be appointed for me before any questioning begins.

- 4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (if available)
1a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE: 354 TRANS BN, APO AE 09366, 976-2755
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR: 106th TRN BN

Section C. Non-waiver

- 1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything

2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

Exhibit M

18127

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
  - a. Your official position.
  - b. Nature of offense(s).
  - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:

"Before I ask you any questions, you must understand your rights."

  - a. "You do not have to answer my questions or say anything."
  - b. "Anything you say or do can be used as evidence against you in a criminal trial."
  - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

*(For civilians not subject to the UCMJ)* You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (*i.e.*, fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" *(If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.)*

SPECIAL INSTRUCTIONS

**WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE:** If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

**IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY:** In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

**PRIOR INCRIMINATING STATEMENTS:**

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

**NOTE:** If 1 or 2 apply, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

**WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS:** If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS *(Continued)*

# Freedom of Information Act Exemption Number 3rd 6

## 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 retrieval.  
**DISCLOSURE:** Disclosure of your social security number is voluntary.

1. LOCATION ARIFJAN, KUWAIT	2. DATE (YYYYMMDD) 20050203	3. TIME 1049	4. FILE NUMBER
5. LAST NAME, FIRST NAME, MIDDLE NAME [REDACTED]	6. SSN [REDACTED]	7. GRADE/STATUS O-3	
8. ORGANIZATION OR ADDRESS 354 TRANS BN			

9. [REDACTED], WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:  
 I WAS STANDING IN THE 354TH TRANS BN TOC CONFERENCE ROOM WAITING TO BRIEF [REDACTED] ON MAINTENANCE STATUS OF ONE OF OUR COMPANIES. [REDACTED] AND [REDACTED] ENTERED THE CONFERENCE ROOM AND BRIEFED [REDACTED] THAT ONE OF THE DRIVERS IN 308TH TRAN OVER AN IRAQI CHILD WHILE DRIVING A M915 AND M872 TRAILER ON MISSION. [REDACTED] SAID THE DRIVER OF THE TRUCK WAS UNAWARE THAT HE'D HIT ANYTHING. THE DRIVER WAS TO BE TAKEN TO SEE COMBAT STRESS AT THE NEXT STOP. [REDACTED] ALSO REPORTED THAT THE DRIVER WAS NORMALLY A SHY AND QUIET SOLDIER WHO DIDN'T SAY MUCH. HE ALSO REPORTED THAT THE CONVOY ESCORT COMMANDER MADE THE DECISION NOT TO STOP BECAUSE THE AREA WAS TOO POPULATED AND THEREFORE DANGEROUS. [REDACTED] MENTIONED THAT THE CONVOY ESCORTS VIDEOTAPE THE INCIDENT AS PART OF A TRAINING VIDEO THEY WERE COMPILING. [REDACTED] TOLD [REDACTED] AND [REDACTED] THAT THE VIDEOTAPE OR BUD NEEDED TO BE SEIZED IMMEDIATELY TO PREVENT THE RELEASE ON THE INTERNET OR OTHER FORUM. HE ALSO DIRECTED [REDACTED] TO CONTACT THE 7TH GROUP CSM AND THE 1/178TH CSM.  
 NOTHING FOLLOWS

10. EXHIBIT	11. INITIALS OF PERSON MAKING STATEMENT [REDACTED]	PAGE 1 OF <u>3</u> PAGES
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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 NUMBER MUST BE INDICATED.

Freedom of Information Act Exemption Jerid 6

USE THIS PAGE IF NEEDED. IF THIS PAGE IS NOT NEEDED, PLEASE PROCEED TO FINAL PAGE OF THIS FORM.

STATEMENT OF [REDACTED] TAKEN AT CAMP ARIEJAN, KUWAIT DATED 03 FEB 05

9. STATEMENT (Continued)

Q: What was your job on the date of the incident?

Q: [REDACTED]

A: BATTALION SAFETY OFFICER AND BATTALION MAINTENANCE OFFICER

A: [REDACTED]

Q: Did you see the incident?

A: NO

Q: What happened the day of the incident?

A: NA

Q: Where there any enemy contact during the convoy?

A: NA

Q: What time did you wake up and SP?

A: NA

Q: Where you tired?

A: NA

Q: Where there any stops before or after the accident?

A: NA

Q: What were the road conditions and was anyone else on the road?

A: NA

Q: What speed where you traveling?

A: NA

Q: Where where you located at the time of the incident?

A: CAMP ARIEJAN, KUWAIT

Q: What was going on in the Cab of the truck before during and after the incident?

A: NA

Q: Did you see the child involved in the incident and if so what was he doing?

A: NA

Q: What happened after the incident?

A: NA

Q: Did you alter the Video?

A: NA

Q: Any maintenance ISSUES that would have an effect on M915's in the area

A: NO.

INITIALS OF PERSON MAKING STATEMENT [REDACTED]

PAGE 2 OF 3 PAGES

FOIA exemption 3 and b

STATEMENT OF [REDACTED] TAKEN AT CAMP ARIFJAN, KU DATED 03 FEB 05

9. STATEMENT (Continued)

[REDACTED]

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 30 day of FEBRUARY, 2005 at CAMP ARIFJAN, KU

[REDACTED]  
308th TC  
CAMP ARIFJAN, KU MAIL APO # 0936  
ORGANIZATION OR ADDRESS

[REDACTED]  
(Signature of Person Administering Oath)

[REDACTED]  
308th TC Camp Arifjan, KU APO AE 0936  
ORGANIZATION OR ADDRESS

[REDACTED]  
(Typed Name of Person Administering Oath)

[REDACTED] USA  
(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE 3 OF 3 PAGES

Rd 1.7 D

FOIA exemption 3 and b

RIGHTS WARNING PROCEDURE/WAIVER CERTIFICATE

For use of this form, see AR 190-30; the proponent agency is ODCSOPS

DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 10, United States Code, Section 3012(g)
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: CAMP ARIFJAN, KUWAIT
2. DATE: 03 FEB 85
3. TIME: 1043
4. FILE NO.
5. NAME: [REDACTED]
6. SSN: [REDACTED]
7. GRADE/STATUS
8. ORGANIZATION OR ADDRESS: 354TH TRANS BN, APO AE 09366

PART I - RIGHTS WAIVER/NON-WAIVER CERTIFICATE

Section A. Rights

The investigator whose name appears below told me that he/she is with the United States Army 106TH TRANS BN
suspected/accused: DEATH OF IRAQI CHILD and wanted to question me about the following offense(s) of which I am

Before he/she asked me any questions about the offense(s), however, he/she made it clear to me that I have the following rights:

- 1. I do not have to answer any question or say anything.
2. Anything I say or do can be used as evidence against me in a criminal trial.
3. (For personnel subject to the UCMJ) I have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with me during questioning.
4. If I am now willing to discuss the offense(s) under investigation, with or without a lawyer present, I have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if I sign the waiver below.

5. COMMENTS (Continue on reverse side)

Section B. Waiver

I understand my rights as stated above. I am now willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer first and without having a lawyer present with me.

WITNESSES (if available)
1a. NAME (Type or Print)
b. ORGANIZATION OR ADDRESS AND PHONE: 308th TC, CAMP ARIFJAN, KUWAIT, APO AE 09366, 430-7333
3. SIGNATURE OF INTERVIEWEE
4. SIGNATURE OF INVESTIGATOR
5. TYPED NAME OF INVESTIGATOR
6. ORGANIZATION OF INVESTIGATOR: 106th TRN BN

Section C. Non-waiver

1. I do not want to give up my rights
I want a lawyer
I do not want to be questioned or say anything
2. SIGNATURE OF INTERVIEWEE

ATTACH THIS WAIVER CERTIFICATE TO ANY SWORN STATEMENT (DA FORM 2823) SUBSEQUENTLY EXECUTED BY THE SUSPECT/ACCUSED

Exhibit 0

PART II - RIGHTS WARNING PROCEDURE

THE WARNING

1. WARNING - Inform the suspect/accused of:
  - a. Your official position.
  - b. Nature of offense(s).
  - c. The fact that he/she is a suspect/accused.
2. RIGHTS - Advise the suspect/accused of his/her rights as follows:

"Before I ask you any questions, you must understand your rights."

  - a. "You do not have to answer my questions or say anything."
  - b. "Anything you say or do can be used as evidence against you in a criminal trial."
  - c. (For personnel subject to the UCMJ) "You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer

can be a civilian you arrange for at no expense to the Government or a military lawyer detailed for you at no expense to you, or both."

- or -

*(For civilians not subject to the UCMJ)* You have the right to talk privately to a lawyer before, during, and after questioning and to have a lawyer present with you during questioning. This lawyer can be one you arrange for at your own expense, or if you cannot afford a lawyer and want one, a lawyer will be appointed for you before any questioning begins."

- d. "If you are now willing to discuss the offense(s) under investigation, with or without a lawyer present, you have a right to stop answering questions at any time, or speak privately with a lawyer before answering further, even if you sign a waiver certificate."

Make certain the suspect/accused fully understands his/her rights.

THE WAIVER

"Do you understand your rights?"

(If the suspect/accused says "no," determine what is not understood, and if necessary repeat the appropriate rights advisement. If the suspect/accused says "yes," ask the following question.)

"Have you ever requested a lawyer after being read your rights?"

(If the suspect/accused says "yes," find out when and where. If the request was recent (*i.e.*, fewer than 30 days ago), obtain legal advice whether to continue the interrogation. If the suspect/accused says "no," or if the prior request was not recent, ask him/her the following question.)

"Do you want a lawyer at this time?"

(If the suspect/accused says "yes," stop the questioning until he/she has a lawyer. If the suspect/accused says "no," ask him/her the following question.)

"At this time, are you willing to discuss the offense(s) under investigation and make a statement without talking to a lawyer and without having a lawyer present with you?" (*If the suspect/accused says "no," stop the interview and have him/her read and sign the non-waiver section of the waiver certificate on the other side of this form. If the suspect/accused says "yes," have him/her read and sign the waiver section of the waiver certificate on the other side of this form.*)

SPECIAL INSTRUCTIONS

**WHEN SUSPECT/ACCUSED REFUSES TO SIGN WAIVER CERTIFICATE:** If the suspect/accused orally waives his/her rights but refuses to sign the waiver certificate, you may proceed with the questioning. Make notations on the waiver certificate to the effect that he/she has stated that he/she understands his/her rights, does not want a lawyer, wants to discuss the offense(s) under investigation, and refuses to sign the waiver certificate.

**IF WAIVER CERTIFICATE CANNOT BE COMPLETED IMMEDIATELY:** In all cases the waiver certificate must be completed as soon as possible. Every effort should be made to complete the waiver certificate before any questioning begins. If the waiver certificate cannot be completed at once, as in the case of street interrogation, completion may be temporarily postponed. Notes should be kept on the circumstances.

**PRIOR INCRIMINATING STATEMENTS:**

1. If the suspect/accused has made spontaneous incriminating statements before being properly advised of his/her rights he/she should be told that such statements do not obligate him/her to answer further questions.

2. If the suspect/accused was questioned as such either without being advised of his/her rights or some question exists as to the propriety of the first statement, the accused must be so advised. The office of the serving Staff Judge Advocate should be contacted for assistance in drafting the proper rights advisal.

**NOTE:** If 1 or 2 applies, the fact that the suspect/accused was advised accordingly should be noted in the comment section on the waiver certificate and initialed by the suspect/accused.

**WHEN SUSPECT/ACCUSED DISPLAYS INDECISION ON EXERCISING HIS OR HER RIGHTS DURING THE INTERROGATION PROCESS:** If during the interrogation, the suspect displays indecision about requesting counsel (for example, "Maybe I should get a lawyer."), further questioning must cease immediately. At that point, you may question the suspect/accused only concerning whether he or she desires to waive counsel. The questioning may not be utilized to discourage a suspect/accused from exercising his/her rights. (For example, do not make such comments as "If you didn't do anything wrong, you shouldn't need an attorney.")

COMMENTS (Continued)

FOIA exemption 3 and 6



REPLY TO  
ATTENTION OF:

DEPARTMENT OF THE ARMY  
COALITION FORCES LAND COMPONENT COMMAND  
HEADQUARTERS THIRD UNITED STATES ARMY  
UNITED STATES ARMY FORCES CENTRAL COMMAND  
APO AE 09306

AFRD-CS

26 January 2005

MEMORANDUM FOR [REDACTED] Headquarters, 106<sup>th</sup> Transportation Battalion,  
Camp Navistar, Kuwait, APO AE 09317

SUBJECT: Appointment of Investigating Officer

1. By order of the Commanding General, you are hereby appointed an investigating officer pursuant to AR 15-6, Procedure for Investigating Officers and Board of Officers, 30 September 1996, and AR 600-34, Fatal Training/Operational Accident Presentations to the Next of Kin, 2 January 2003, to investigate the accident that occurred on 25 January 2005 at or near the junction of MSRs Tampa and Orlando in Iraq, involving the 308th Transportation Company, 354th Transportation Battalion, which resulted in the death of an Iraqi child.
2. Conduct your investigation in accordance with the procedures outlined in Chapters 3 and 4 of AR 15-6. Make findings as to the circumstances and causes of the events that resulted in the death of the child. Also make findings and recommendations regarding any practices or procedures that you determine contributed to the accident.
3. If, in the course of your investigation, you come to suspect that any witness may be responsible for the accident or otherwise committed an offense under the Uniform Code of Military Justice (UCMJ), advise the witness of his or her rights under Article 31, UCMJ, using DA Form 3881 (Rights Warning Procedure/Waiver Certificate). Before beginning your investigation, contact your legal advisor, [REDACTED] Office of the Staff Judge Advocate, at DSN: (318) 430-6302. He will provide you initial legal guidance and any subsequent legal assistance you require.
4. Submit your findings and recommendations to the Staff Judge Advocate for legal review not later than 9 February 2005. Use DA Form 1574 when you prepare your report of investigation. Submit any request for extension to me in writing.

FOR THE COMMANDER:

Encl  
SIR, 308th TC, 25 Jan 05

[REDACTED]  
TGS  
Chief of Staff



DEPARTMENT OF THE ARMY  
106<sup>TH</sup> TRANSPORTATION BATTALION (MOTOR TRANS)  
CAMP NAVISTAR, KUWAIT  
APO AE 09317

AFZB-SB-TB-S3

05 February 2005

MEMORANDUM FOR Commander, CFLCC, ATTN: [REDACTED]  
Kuwait, APO AE 09306

SUBJECT: Request for Extension for ART 15-6 Investigation IRT 25 JAN 2005  
Accident

1. I request an extension to finish my investigation because the convoy commander is still in IZ as is the TC of the vehicle involved in the incident. I have interviewed everyone else involved so far.

2. POC for this information is [REDACTED] DSN 318-844-1117,  
[REDACTED] or [REDACTED]

[REDACTED]  
S3 TC

FOIA exemption 3 and b

[REDACTED]

---

**From:** [REDACTED]  
**Sent:** Saturday, February 05, 2005 18:44  
**To:** [REDACTED]  
**Subject:** RE: ART 15-6

You have until 15 February to complete. Thanks.

[REDACTED]

---

**From:** [REDACTED]  
**Sent:** Saturday, February 05, 2005 2:27 PM  
**To:** [REDACTED]  
**Subject:** ART 15-6

Sir, I am requesting an extension for my investigation, the Convoy Commander is still up North on a convoy as well as the TC of the vehicle of the incident. As soon as they comeback I will interview them and complete the survey.

<< File: extension.doc >>

[REDACTED]

83

713-8437

"First Among Equals!"

FIOA exemption 3 and b

[REDACTED]

---

**From:** [REDACTED]  
**Sent:** Monday, February 14, 2005 09:52  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** RE: Extension Request for AR 15-6

Granted until 20 Feb. Thanks.

---

**From:** [REDACTED]  
**Sent:** Monday, February 14, 2005 9:54 AM  
**To:** [REDACTED]  
**Subject:** Extension Request for AR 15-6

Sir, I am requesting an extension for my AR 15-6 investigation, I am almost finished but we had a soldier KIA on 09 FEB 05 and I have been heavily involved in this incident. The original date due was 9 FEB 05, you granted me an extension to 15 FEB 05 on 05 FEB 05.

VR

[REDACTED]  
S3

713-8437

"First Among Equals!"

# FOIA exemption 3 and b

15-6 Time Line

Timeline to 25 JAN 05 15-6 Investigation		
Date	Time	Event
25-Jan		Accident Occurs
26-Jan		Appointment of 15-6 Officer
28-Jan	0910	Receive Appointment Orders by Email
28-Jan	1100	Called [REDACTED] 7 <sup>th</sup> Group Legal, IRT to Appointment
28-Jan	1254	Called [REDACTED] CFLCC SJA, Left Message
28-Jan	1256	Called [REDACTED] 354 <sup>th</sup> S3, IRT Accident/SIR
28-Jan	1300	Called [REDACTED] 7 <sup>th</sup> Group Battle Captain, IRT Accident/SIR
28-Jan	1500	RECON of ASR Circle, IZ with 2-172 <sup>nd</sup> ARM Scouts
29-Jan	1000	Validation Exercise with 2-172 <sup>nd</sup>
29-Jan	1043	Real World High jacking I responded to with SECFOR
29-Jan	1500	Continue Validation Exercise with 2-172 <sup>nd</sup>
30-Jan		[REDACTED] Visit [REDACTED] Visit
30-Jan	2100	SECFOR Five hour fire fight
31-Jan	0910	Called [REDACTED], received guidance
31-Jan		Read AR 15-6
31-Jan		Read AR 600-34
31-Jan		Plan of attack development
1-Feb		[REDACTED] Visit
2-Feb		Work on AR 15-6
2-Feb	1453	Called [REDACTED] 354 <sup>th</sup> S3, IRT Accident/SIR
2-Feb	1457	Called [REDACTED] 354 <sup>th</sup> SO, IRT Accident
2-Feb	1508	Called [REDACTED] 7 <sup>th</sup> LNO for Statement
2-Feb	1514	Called [REDACTED] MNCJ Safety Office
2-Feb	1526	Called [REDACTED] CFLCC Safety Office
3-Feb	0900	Interview [REDACTED]
3-Feb	1042	Interview [REDACTED]
3-Feb	1049	Interview [REDACTED]
3-Feb	1045	Interview [REDACTED]
3-Feb	1050	Interview [REDACTED]
3-Feb	1048	Interview [REDACTED]
4-Feb		Work on AR 15-6
5-Feb	1330	Interview [REDACTED]
5-Feb		[REDACTED] Grants extension until 15 FEB
6-Feb		Work on AR 15-6
7-Feb	1526	Interview [REDACTED]
8-Feb		Work on AR 15-6
9-Feb		Soldier KIA in BN from IED
9-Feb		2nd Convoy BN Convoy involved in injury causing casualty.
10-Feb	1140	Interview [REDACTED]
10-Feb	1415	Interview [REDACTED]
10-Feb	1530	Interview [REDACTED]
11-Feb		Work on AR 15-6
12-Feb		Work on AR 15-6
13-Feb		Work on AR 15-6
14-Feb		[REDACTED] Grants extension until 20 FEB
14-Feb		Work on AR 15-6
15-Feb		Work on AR 15-6
16-Feb		Work on AR 15-6
16-Feb		[REDACTED] Visits
16-Feb		Memorial Service for [REDACTED]
17-Feb		Work on AR 15-6
18-Feb		Work on AR 15-6
19-Feb		Turn In AR 15-6

2/18/200515:50

## Privacy Act Statement

Pursuant to 10 U.S.C. 3013 and Army Regulation 15-6, we request this information. This information will be used to evaluate the facts and circumstances currently under investigation. Your response is not mandatory. However, your failure to respond will require that we evaluate this matter without the benefit of your input. This information will be used in determining the appropriateness of any action, including adverse administrative action. Department of Defense employees, acting within their official capacity, who have a need to know this information, will have access to this information. This information may be used as the basis for adverse personnel action, and documents reflecting this information and such action may be filed in your official personnel files.

## Affidavit

I, [REDACTED] have read or have had read to me this Privacy Act Statement. I fully understand the contents of the entire statement.

[REDACTED]  
(Signature of Person Making Statement)

Subscribed and sworn to before me, a person authorized by law to administer oaths, this day of 3 February, 2004 at Camp Arafat Kuwait

[REDACTED]  
(Signature of Person Administering Oath)

[REDACTED]  
(Type name of Person Administering Oath)

[REDACTED] USA  
(Authority to Administer Oath)

# Privacy Act Statement

Pursuant to 10 U.S.C. 3013 and Army Regulation 15-6, we request this information. This information will be used to evaluate the facts and circumstances currently under investigation. Your response is not mandatory. However, your failure to respond will require that we evaluate this matter without the benefit of your input. This information will be used in determining the appropriateness of any action, including adverse administrative action. Department of Defense employees, acting within their official capacity, who have a need to know this information, will have access to this information. This information may be used as the basis for adverse personnel action, and documents reflecting this information and such action may be filed in your official personnel files.

## Affidavit

I, [REDACTED] have read or have had read to me this Privacy Act Statement. I fully understand the contents of the entire statement.

[REDACTED]  
 (Signature of Person Making Statement)  
 Subscribed and sworn to before me, a person authorized by law to administer oaths, this 10 day of FEB, 2004 at 1058

[REDACTED]  
 (Signature of Person Administering Oath)

[REDACTED]  
 (Type name of Person Administering Oath)

[REDACTED] U.S.A.  
 (Authority to Administer Oath)

FOIA exemption 3 and b

## Privacy Act Statement

Pursuant to 10 U.S.C. 3013 and Army Regulation 15-6, we request this information. This information will be used to evaluate the facts and circumstances currently under investigation. Your response is not mandatory. However, your failure to respond will require that we evaluate this matter without the benefit of your input. This information will be used in determining the appropriateness of any action, including adverse administrative action. Department of Defense employees, acting within their official capacity, who have a need to know this information, will have access to this information. This information may be used as the basis for adverse personnel action, and documents reflecting this information and such action may be filed in your official personnel files.

## Affidavit

I, [REDACTED] have read or have had read to me this Privacy Act Statement. I fully understand the contents of the entire statement.

[REDACTED]  
(Signature of Person Making Statement)

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 10 day of FEB, 2004 at 1415

Paul Arif Tomke Staff

[REDACTED]  
(Signature of Person Administering Oath)

(Type name of Person Administering Oath)

USA  
(Authority to Administer Oath)

ENC 4-3

FOIA exempt 3 and 6

## Privacy Act Statement

Pursuant to 10 U.S.C. 3013 and Army Regulation 15-6, we request this information. This information will be used to evaluate the facts and circumstances currently under investigation. Your response is not mandatory. However, your failure to respond will require that we evaluate this matter without the benefit of your input. This information will be used in determining the appropriateness of any action, including adverse administrative action. Department of Defense employees, acting within their official capacity, who have a need to know this information, will have access to this information. This information may be used as the basis for adverse personnel action, and documents reflecting this information and such action may be filed in your official personnel files.

## Affidavit

I, [REDACTED] have read or have had read to me this Privacy Act Statement. I fully understand the contents of the entire statement.

[REDACTED]  
(Signature of Person Making Statement)

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 10 day of Feb, 2004 at 1531

Camp Arifjo, K 5

[REDACTED]  
(Signature of Person Administering Oath)

[REDACTED]  
(Type name of Person Administering Oath)

USA  
(Authority to Administer Oath)

Encl 4-4






FOIA exemption 3 and 6

# Privacy Act Statement

Pursuant to 10 U.S.C. 3013 and Army Regulation 15-6, we request this information. This information will be used to evaluate the facts and circumstances currently under investigation. Your response is not mandatory. However, your failure to respond will require that we evaluate this matter without the benefit of your input. This information will be used in determining the appropriateness of any action, including adverse administrative action. Department of Defense employees, acting within their official capacity, who have a need to know this information, will have access to this information. This information may be used as the basis for adverse personnel action, and documents reflecting this information and such action may be filed in your official personnel files.

## Affidavit

 have read or have had read to me this Privacy Act Statement. I fully understand the contents of the entire statement.

  
 (Signature of Person Making Statement)  
 Subscribed and sworn to before me, a person authorized by law to administer oaths, this 5 day of FEB, 2004 at 132c  
  
 (Signature of Person Administering Oath)  
 (Type name of Person Administering Oath)  
USA  
 (Authority to Administer Oath)

ENCL 4-5

# Privacy Act Statement

Pursuant to 10 U.S.C. 3013 and Army Regulation 15-6, we request this information. This information will be used to evaluate the facts and circumstances currently under investigation. Your response is not mandatory. However, your failure to respond will require that we evaluate this matter without the benefit of your input. This information will be used in determining the appropriateness of any action, including adverse administrative action. Department of Defense employees, acting within their official capacity, who have a need to know this information, will have access to this information. This information may be used as the basis for adverse personnel action, and documents reflecting this information and such action may be filed in your official personnel files.

## Affidavit

I, [REDACTED] have read or have had read to me this Privacy Act Statement. I fully understand the contents of the entire statement.

[REDACTED SIGNATURE]

(Signature of Person Making Statement)

Subscribed and sworn to before me, a person authorized by law to administer oaths, this day of 3 Feb, 2005 at CAMP

ARIFIAN, KUMAR

[REDACTED SIGNATURE]  
(Signature of Person Administering Oath)

[REDACTED NAME]  
(Type name of Person Administering Oath)

[REDACTED AUTHORITY]  
(Authority to Administer Oath)

# Privacy Act Statement

Pursuant to 10 U.S.C. 3013 and Army Regulation 15-6, we request this information. This information will be used to evaluate the facts and circumstances currently under investigation. Your response is not mandatory. However, your failure to respond will require that we evaluate this matter without the benefit of your input. This information will be used in determining the appropriateness of any action, including adverse administrative action. Department of Defense employees, acting within their official capacity, who have a need to know this information, will have access to this information. This information may be used as the basis for adverse personnel action, and documents reflecting this information and such action may be filed in your official personnel files.

## Affidavit

I, [REDACTED] have read or have had read to me this Privacy Act Statement. I fully understand the contents of the entire statement.

[REDACTED]

(Signature of Person Making Statement)

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 7 day of Feb, 2007 at Camp Arifjan, Kuwait.

[REDACTED]

(Signature of Person Administering Oath)

(Type name of Person Administering Oath)

USA  
(Authority to Administer Oath)

FOIA exemption 3 and b

## Privacy Act Statement

Pursuant to 10 U.S.C. 3013 and Army Regulation 15-6, we request this information. This information will be used to evaluate the facts and circumstances currently under investigation. Your response is not mandatory. However, your failure to respond will require that we evaluate this matter without the benefit of your input. This information will be used in determining the appropriateness of any action, including adverse administrative action. Department of Defense employees, acting within their official capacity, who have a need to know this information, will have access to this information. This information may be used as the basis for adverse personnel action, and documents reflecting this information and such action may be filed in your official personnel files.

## Affidavit

I, [REDACTED] have read or have had read to me this Privacy Act Statement. I fully understand the contents of the entire statement.

[REDACTED]  
(Signature of Person Making Statement)

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 3 day of Feb, 2005 at 0900

[REDACTED]  
(Signature of Person Administering Oath)

(Type name of Person Administering Oath)

[REDACTED] USA  
(Authority to Administer Oath)

FNL 4-8

FOIA exemption 3 and 6

## Privacy Act Statement

Pursuant to 10 U.S.C. 3013 and Army Regulation 15-6, we request this information. This information will be used to evaluate the facts and circumstances currently under investigation. Your response is not mandatory. However, your failure to respond will require that we evaluate this matter without the benefit of your input. This information will be used in determining the appropriateness of any action, including adverse administrative action. Department of Defense employees, acting within their official capacity, who have a need to know this information, will have access to this information. This information may be used as the basis for adverse personnel action, and documents reflecting this information and such action may be filed in your official personnel files.

## Affidavit

I, [REDACTED] have read or have had read to me this Privacy Act Statement. I fully understand the contents of the entire statement.

[REDACTED]  
(Signature of Person Making Statement)

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 3 day of Feb, 2004 at 1835

[REDACTED]  
(Signature of Person Administering Oath)

[REDACTED]  
(Type name of Person Administering Oath)

[REDACTED]  
(Authority to Administer Oath)

## Privacy Act Statement

Pursuant to 10 U.S.C. 3013 and Army Regulation 15-6, we request this information. This information will be used to evaluate the facts and circumstances currently under investigation. Your response is not mandatory. However, your failure to respond will require that we evaluate this matter without the benefit of your input. This information will be used in determining the appropriateness of any action, including adverse administrative action. Department of Defense employees, acting within their official capacity, who have a need to know this information, will have access to this information. This information may be used as the basis for adverse personnel action, and documents reflecting this information and such action may be filed in your official personnel files.

## Affidavit

I, [REDACTED] have read or have had read to me this Privacy Act Statement. I fully understand the contents of the entire statement.

[REDACTED]

(Signature of Person Making Statement)

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 3<sup>rd</sup> day of February, 2004<sup>Feb</sup> at 10:45 HRS

[REDACTED]

(Signature of Person Administering Oath)

(Type name of Person Administering Oath)

USA

(Authority to Administer Oath)

FOIA exempt b7 3 and b6

## Privacy Act Statement

Pursuant to 10 U.S.C. 3013 and Army Regulation 15-6, we request this information. This information will be used to evaluate the facts and circumstances currently under investigation. Your response is not mandatory. However, your failure to respond will require that we evaluate this matter without the benefit of your input. This information will be used in determining the appropriateness of any action, including adverse administrative action. Department of Defense employees, acting within their official capacity, who have a need to know this information, will have access to this information. This information may be used as the basis for adverse personnel action, and documents reflecting this information and such action may be filed in your official personnel files.

## Affidavit

I, [REDACTED] have read or have had read to me this Privacy Act Statement. I fully understand the contents of the entire statement.

[REDACTED]  
(Signature of Person Making Statement)  
Subscribed and sworn to before me, a person authorized by law to administer oaths, this 30 day of 17<sup>th</sup> FEBRUARY, 2004 at 1041

[REDACTED]  
(Signature of Person Administering Oath)

[REDACTED]  
(Type name of Person Administering Oath)

[REDACTED], USA  
(Authority to Administer Oath)

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Johns Patrick  
2200 Army Pentagon  
Washington, DC 20370

2. Article Number

(Transfer from service label)

7002 0860 0006 5811 9827

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154C

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

- D. Is delivery address different from item 1?  Yes
- If YES, enter delivery address below:  No

3. Service Type

- Certified Mail
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee)

- Yes



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