EXHIBIT AG

15 Sep 07

Memorandum for Record

Subject: AR 15-6 Investigation into the facts and circumstances of an engagement on or about 30 Jun 07 that allegedly killed an Iraqi civilian (b)(6)

- 1. On 15 Sep 07, between 1505 and 1600 hrs, I interviewed (b)(3),(b)(6) (aka, b)(3),(b)(6, who was the interpreter present with 1/D/1-5CAV on the night of 30 Jun 07. Our discussion started with (b)(3),(b)(6) general description of what happened the night of 30 Jun 07. At the end of our discussion, I asked specific questions and he answered them on a sworn statement.
- 2. Though his memory of the event lacked detail, he was able to confirm or deny potentially important aspects of this incident. Specifically,
 - The soldiers treated the civilians at (b)(6) home well:
 - The soldiers did not break or steal property;
 - He did not remember where the soldiers found the weapons;
 - ')(3),(b)(called the family in the early morning hours of 01 Jul 07 to inform the family that (b)(6) was fine.
 - (b)(3),(b)(6) cell phone number match the number (b)(6) provided to me during my 06 Jun 07 visit; (b)(3),(b)(6)

(b)(3),(b)(6)

LTC, FA50 AR 15-6 Investigating Officer

Attached – Tiger's Sworn Statment

Exhibit AG

SWORN STATEMENT استمارة القسم		
Deathorman		المنيب الاساسي
Desires of mari	i,	الاستعلاماتالروتينو المحتويات:
		,,,
التاريخ: الوقت: رقم الاضبارة	نبر	الموة
3-22.PM 15-Sep-07		
سترى الحالة : (b)(3),(b)(6)	(b)(3),(b)(6)	الأسم الثلاثي: }
1-5-CAV-D		ن الكامل :
عظيم بصحة اقوالي العدونة ادناة	(b)(3),(b)(6)	اثنا الموقع ا
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of tow minte after that we go!	ng to the hase	verind
2-JWas Set in voof and I hea outow minterstevent we go! (b)(6) on EVthed after That we can hem and our medic treat him	Coul medica	otvest
hem and or med it to each	,	
3- yes x I ry come down repair peop	Le .	
5-they search and talk tothe	e Reofle	
Adonothow		
7- yes - Jaskhim - why he	vas out said	aftell
curren	Cather and	i Scair
2-yes- Atald them Wetreat your	tal	16 17601
(b)(3),(b)(6)		
(b)(3),(b)(6)	-	نسخة
	يسمية . وستلمت في تاريخ	صفحات اضافية ر

Sworn Statement Form-Arabic (USIR 503-2)

CENTCOM 018232

Exh AG

	تاريخ الاستلام	i	لاستمارة العائدة للشخص
	شريح الاستخام		ملخص الاستمارة .
	(b)(3)),(b)(6)	
	. 10:	التع	
صحيفة رقم انا بشكل كامل اقس	عيفة رقم التي تنتهي في	ى قد هذه الاستمارة المذكورة في صم	نا المدعو (b)(6) ثم
قد ملت كل التصحيحات الموجودة و عقاب ـ او تحت اى تاثير غير شر	دة في كل الاستمارةصادقة واتا	 أ - الله النصحيحات الموجو 	يول هذه الاستداد عائد الساسطة أن اللاسا
<i>y- y- y- u</i> , y y	,	٠, ١٠٠٠ و ١٠٠٠ و ١٠٠٠	(b)(6)
(b)(3),(b)(6)	توقيع المثرف	(b)(3),(b)(6)	الثباهد
		(b)(3),(b)(6)	
		CP Liberty	العنوان
(b)(3),(b)(6)	اسم المشرف	(b)(3),(b)(6)	
Ltc, IN)(3)(b)(<u>Spc</u> (b)(3)(t	
			عنوان الدائرة

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Exh AG

Questions for (b)(6)
Do you remember the incident on 30 Jun on (b)(2)High
2 Tell me what happened?
3 Did you go to the house?
What did you do while at the house? In / out of the house?
What did you hear or see the soldiers doing? In / out of the house?
Where were the weapons found?
7 How well did the soldiers treat the family? Did they speak to the family?
Did you talk to the casualty? What did he say?
7 Did you hear or see any of the soldiers damaging or stealing money, property, etc?
/ Did you call the family after you left the house? When? For what purpose? How often?
// What are your cell phone numbers?

CENTCOM 018234

Exh AG

29 Oct 07

Memorandum for Record

Subject: AR 15-6 Investigation into the facts and circumstances of an engagement on or about 30 Jun 07 that allegedly killed an Iraqi civilian, (b)(6)

- 1. On 29 Oct 07, between 2024 and 2045 hrs, I interviewed (b)(3),(b)(6) (aka, b)(3),(b)(6)for the second time. 5)(3),(b)(6)was the interpreter present with 1/D/1-5CAV on the night of 30 Jun 07.
- 2. My questions were focused on understand(b)(3),(b)(6) physical location on the roof of (b)(2)High what he saw before the shooting; his recollection of the weapons found that night; and his contact with the (b)(6) family the morning following the incident. 3)(3),(b)(6) provided the following information:
- Before the shooting, $\mathfrak{I}(3)$, $\mathfrak{I}(b)$ (twas sitting down behind the wall that surrounds the rooftop of $\mathfrak{I}(b)$ (2)High He was on the rooftop with the other members of the OP and leam. Because he was sitting down he could not see over the top of the wall and, therefore, did not see what the other members of the team saw. He said he did not see the man before the $\mathfrak{I}(b)$ (2)High fired because he was sitting down behind the wall. He got up and went into the room on top of the roof (a stairwell) when the sniper fired his shot and when the squad provided the short period of suppressive fire. $\mathfrak{I}(3)$, $\mathfrak{I}(b)$ ($\mathfrak{I}(d)$) did not hear a conversation among the sniper team or others leading up to the initial shot.
- He does not know where the weapons were found, just that the soldiers found the AK-47 with additional ammunition.
-)(3),(b)(contacted the family twice the morning following the incident; once when they arrived at Riva Ridge Medical Center on Camp Liberty and another time after (b)(6) had been flown to the CSH.)(3),(b)(€did not accompany (b)(6) to the CSH. Both times he told the family that (b)(6) was receiving medical attention "like an American Soldier" and that (b)(6) was still alive.)(6), (b)(€never said to he thought the shooting was wrong or unlawful. He never said tnat ne was sorry for what happened.)(3),(b)(€has not talked to the family since.

(b)(3),(b)(6)

LTC, FA50 AR 15-6 Investigating Officer

EXHIBIT AH

----Original Message----

From: (b)(3),(b)(6) LTC MNC-I SJA Chief Admin and Civil Law

[mailto: (b)(3),(b)(6), (b)(2)High

Sent: Monday, September 24, 2007 12:26 PM

To: (b)(3),(b)(6) W MAJ 62d MED BDE CMD Judge Advocate

Cc: (b)(3),(b)(6) LTC 1CD HHC SJA; (b)(3),(b)(6) LTC 1CD

SJA Deputy Staff Judge Advocate

Subject: FW: Medical exam, Uncle (b)(6)

(b)(3),(b)(6)

Please see the e-mail string below and pass to your medical investigator contributing to the MND-B lead investigation.

The after incident medical care and return of the remains to the family is of concern and needs a thorough review by 62~MEDCOM and / or the MND-B Division Surgeon for authoritative and credible presentation.

Little pieces of information and threads of analysis keep rising to the surface. The point being to expect our report to be critically analyzed. Competent medical care is a main area of inquiry. The suspicion or allegation is that (b)(6) was denied or neglected medical care as a suspected insurgent.

As a systems check, can you or the MND-B team confirm whether we have gotten copies of the family post-mortem photos and had them analyzed by a doctor in relation to the medical records?

Thanks,

LTC (3),(b)

----Original Message----

From: (b)(3),(b)(6) COL MNF-I SJA Staff Judge Advocate

Sent: Monday, September 24, 2007 11:48 AM

To: (b)(3),(b)(6) LTC MNC-I SJA Chief Admin and Civil Law

Subject: FW: Medical exam, Uncle (b)(6)

o)(3),(b)(6-do you know if this info was provided to the IO? I recall passing it along back in August. If not, can you forward? (3),(b)

(b)(3),(b)(6)

Colonel, U.S. Army

Multi-National Force-Iraq

Staff Judge Advocate

DSN 318-822-2502 (CV) 239-8725 (IZ)

SVOIP 243-4056 (CV) 243-2199 (IZ)

(b)(3),(b)(6)

Baghdad July 29th 2007

1330 hrs

Colonel:

I am forwarding here an email exchanbe between the dead man's brother, who we are told is (b)(6) family in Baghdad (b)(6)

He looked at emailed copies opf photographs the family took of the body after it was recoveered from the Medical City morgue in Baghdad, and before it was washed for burial.

The (unprofessional) conclusion of members of the family who saw the body was that the entry wound of the fatal bullet was in the back, and the exit wound in the front.

From the new exchange with Mr. (b)(6) brother in (b)(6)

(b)(6) it appears that the chest wound the family took to be an exit wound may in fact have been an "operating wound", if that's the correct word. But that would dstill leave open the possibility that the fatal shot was, in fact, fired into Mr. (b)(6) back.

The further point of interest here is the physician's comment, working from the photographs, that there was gangrene around the wound(s), and that this suggested that Mr. (b)(6) may, in fact, have lived for a day or two after the shooting.

Of course, all of this is speculative, since the physician is working from photographs, and is emoitonally involved, as the dead man's brother.

The family has asked me to say that they are happy to provide the US Army with the photographs of the body if asked, and they would be happy, too, to approve an exhumation, should that be required.

Best regards

(b)(6)

-----Forwarded Message-----

j

From: INTERNET

(b)(6)

INTERNET:

(b)(6)

To: , (b)(6)

Date: 7/29/2007 1:14 PM

RE: Medical exam, Uncle (b)(6)

Subj: Medical Exam

Date: 29/07/2007 10:08:19 GMT Daylight Time

From: (b)(6)

To: (b)(6)

Sent from the Internet (Details)

CENTCOM 018238

EXHIBIT

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Hi (b)(6)
Please find below what my uncle replied about my uncle's death.
Best regards
(b)(6)

---- Forwarded Message ---
From: (b)(6)
To: (b)(6)
Cc: (b)(6)

(b)(6)

Sent: Friday, July 27, 2007 10:33:48 PM
Subject: Re: Fw: Photos + Signature
```

Dear (b)(6)

I cant be 100%sure from examining the photos alone . still I can say this 1- He have gangrene area on the right heal& at the middle of the operating wound, which mean he was alive for 2 or 3 days post operative, but neglected i.e no nursing care.2- the operation wound was unusual, (not efficient surgeon)3- the chest wound made after his death Dr.

```
---- Original Message ----
From: (b)(6)
To: (b)(6)
Sent: Friday, July 27, 2007 10:13:11 AM
Subject: Re: Fw: Photos + Signature
```

Dear (b)(6)

I thank you very much for having sent the photos to me. Although they are hard to watch they might give some indications of what could have happend to Uncle (b)(6) between the shot and the day he was recovered. The chest obviously had been opened and I wonder from whom and for which purpose? According to your professional opinion, what could have been the reason? And what else do you read from the pictures?

Let us know if you got more information. Meantime we all send you our best regard whishes ans lots of hugs & kisses

(b)(6)

CENTCOM 018239

EXHIBIT

(b)(6)

----- Internet Header -----

Sender:

(b)(6)

Received:

(b)(6)

(b)(6)

Received:

(b)(6)

(b)(6)

(EDT,

From:

(b)(6)

Date: Sun, 29 Jul 2007 05:14:10 EDT Subject: Medical exam, Uncle (b)(6)
To: johnfisherburns@compuserve.com

(b)(6)

CENTCOM 018240

EXHIBIT

X-Spam-Flag: NO

X-Virus-Scanned: ClamAV version 0.88.7, clamav-milter version 0.88.7 on

 ${\tt liaaglab.mx.compuserve.com}$

X-Virus-Status: Clean

Classification: UNCLASSIFIED//FOR OFFICIAL USE ONLY

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DEPARTMENT OF THE ARMY MND-B DIVISION SURGEON OFFICE CAMP LIBERTY, IRAQ APO AE 09344-0329

AFYB-DSS

25 Sep 07

MEMORANDUM FOR RECORD

SUBJECT: Observation of medical evidence presented in the case

(b)(6)

- 1. I have been asked to give my impression of the care rendered to (b)(6) following a mortal injury sustained on 30 June 07. I am basing my interpretation on the photographs presented and the written and verbal evidence provided by those involved in the care of the patient. I was never actually involved in his care.
- 2. Mr. sustained a gunshot wound which entered his right back and exited thru the left side of his chest. He was evacuated to the Riva Ridge Troop Medical Clinic (TMC) where intense resuscitative efforts were made to include blood transfusion and the insertion of a chest tube, with the intent of allowing his damaged lung to re-inflate. At the point that the physicians at Riva Ridge felt he was stable enough to transport, he was MEDEVAC'd to the 31st Combat Support Hospital (CSH) where definitive surgical care was available. He arrived alive, but in a critical and unstable condition. The patient's vital signs were deteriorating consistent with a continued loss of blood. Shortly thereafter, the patient's heart stopped. At this point, the attending physician, Dr. (b)(3),(b)(6)surgically opened the patient's chest and cross-clamped his aorta in order to ensure that his vital organs remained perfused and restored his vital signs. This is a very temporizing and heroic procedure to buy extra time to save a patient's life. In an attempt to determine and control the unknown source of bleeding Dr.b)(6), (b)(3 then performed an exploratory laparotomy, in which the patient's abdomen was surgically opened. It was evident that considerable damage had been done to the patient's spleen, liver and intestinal tract. A splenectomy was performed and considerable efforts made to control the bleeding and mitigate died of his wounds. the damage done. The efforts were unsuccessful and Mr. (b)(6)
- 3. The surgical incisions present in the pictures of Mr. (b)(6) while concerning in appearance, are consistent with the medical management he underwent. Unfortunately his wounds were of such a severity that the best efforts of the surgical team were unable to save his life.

Very Respectfully,

(b)(3),(b)(6)