

SWORN STATEMENT

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

PRIVACY ACT STATEMENT

AUTHORITY: Title 10, USC Section 301; Title 5, USC Section 2951; E.O. 9397 Social Security Number (SSN).
PRINCIPAL PURPOSE: To document potential criminal activity involving the U.S. Army, and to allow Army officials to maintain discipline, law and order through investigation of complaints and incidents.
ROUTINE USES: Information provided may be further disclosed to federal, state, local, and foreign government law enforcement agencies, prosecutors, courts, child protective services, victims, witnesses, the Department of Veterans Affairs, and the Office of Personnel Management.
DISCLOSURE: Disclosure of your SSN and other information is voluntary.

1. LOCATION (b)(6) RS 2. DATE (YYYYMMDD) 2008 3. TIME 1645 4. FILE NUMBER
5. LAST NAME FIRST NAME MIDDLE NAME (b)(6) 6. SSN (b)(6) 7. GRADE/STATUS (b)(6)
8. ORGANIZATION OR ADDRESS (b)(6)

I, (b)(6), WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

SFC Flores was always highly motivated. He always had a smile on his face and was always "crackin" jokes. He was passionate about the mission and kept us motivated at all times.

When I came off of leave and reported back in 8 Aug 08 I noticed a change in him. SFC Flores was very tired and seemed stressed out. Per a phone conversation he said that he had to report to work at 0630 and not getting off till 2200. He said that he was over stressed and over tired.

I feel that the stress of the job had a major contribution to him taking his life. His children were a part of his life that he never would hurt. He loved his family and tried his hardest to be with them.

He will be sadly missed and I will always remember his smile and the love he showed to his family.

(b)(6) (b)(6) (b)(6)

10. EXHIBIT 11. INITIALS OF PERSON MAKING STATEMENT (b)(6) PAGE 1 OF 2 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

(b)(6)

TAKEN AT

(b)(6)

RS DATED 3 Sept 08

9. STATEMENT (Continued)

NA NA NA NA

AFFIDAVIT

I, (b)(6), HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE 1. 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.

(b)(6)

(Signature of Person Making Statement)

WITNESSES:

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 3 day of September, 2008 at 1645 1st

(b)(6)

(Signature of Person Administering Oath)

(b)(6)

(Typed Name of Person Administering Oath)

Article 136

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

PAGE 2 OF 2 PAGES