## UNCLASSIFIED//FOUO



## HEADQUARTERS UNITED STATES AFRICA COMMAND

OFFICE OF THE COMMANDER UNIT 29951 APO AE 09751-9951

22 April 2019

#### MEMORANDUM FOR RECORD

SUBJECT: Army Regulation 15-6 Investigation into the Facts and Circumstances Surrounding the Death of Staff Sergeant Alexander Conrad in the Vicinity of Combat Outpost Somalia on or about 8 June 2018

- 1. I approve the findings and recommendations of the investigating officer, as endorsed by Commander, U.S. Special Operations Command Africa, and determine Staff Sergeant Conrad died in the line of duty.
- 2. I offer my sincerest condolences to the family of Staff Sergeant Conrad. Staff Sergeant Conrad courageously died defending his country, and we honor his dedicated service and sacrifice.
- 3. Staff Sergeant Conrad suffered multiple, severe combat wounds initially treated under combat conditions. The medical care he received at the point of injury, during the aeromedical evacuation, and by the expeditionary resuscitative surgical team was consistent with established medical procedures, (b) (6)

  Although their efforts were ultimately not able to save Staff Sergeant Conrad's life, the timely response and actions of the ground force and medical responders throughout the evacuation were noteworthy.
- 4. We continually assess our strategic environment, operational approach, and tactical activities to ensure U.S. Africa Command remains appropriately postured and resourced for assigned missions. Therefore, I direct Commander, U.S. Special Operations Command Africa to review established minimum force and response posture requirements for special operations in Africa and provide me, within 60 days, any recommendations for adjustments.
- 5. I direct Commander, U.S. Special Operations Command Africa to complete the required redaction of the approved investigation report and forward the redacted report to the Department of the Army for appropriate action to support the notification and briefing of Staff Sergeant Conrad's next of kin.

6. I direct a copy of this investigation be provided to Commander, U.S. Special Operations Command for review of the findings and recommendations pertaining to staffing, training, and equipping special operations forces.

THOMAS D. WALDHAUSER General, U.S. Marine Corps

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## HEADQUARTERS SPECIAL OPERATIONS COMMAND AFRICA UNIT 30401 APO AE 09107

ACSO-CDR 10 April 2019

MEMORANDUM FOR Commander, United States Africa Command, UNIT 29951, APO AE, 09751-9951

SUBJECT: (U//FOUO) Army Regulation 15-6 Investigation into the Facts and Circumstances Surrounding the Death of Staff Sergeant Alexander Conrad in the vicinity of Combat Outpost Somalia on or about 8 June 2018

REF: (a) Memorandum for Commander, U.S. Special Operations Command Africa, 14 March 2019.

- 1. -(U//FOUO) I provide this memorandum in response to queries identified in your 14 March 2019 memorandum (ref a). My responses are below your enquiries, in the order they were transcribed:
  - a. (U//FOUO) Assessment of the intelligence reporting on the likelihood of enemy contact and the efficacy of mitigation measures employed by the force in consideration of the assessed threat, particularly the enemy indirect fire (IDF) attack on 6 June 2018.

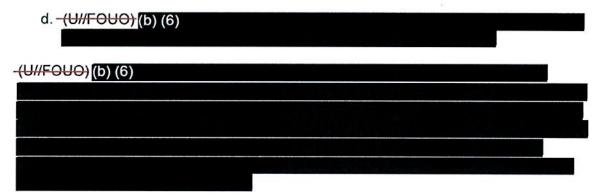
(S)(b)(1)1.4a, (b)(1)1.4c	
acceptable level of risk to U	To mitigate this threat to an US forces, we employed a number of measures to address all
possible courses of action b	by AS, (b)(1) 1.4a, (b)(1) 1.4c
	(b)(1)1.4a, (b)(1)1.4c

# (b)(1)1.4a No level of military planning, no matter how comprehensive, can mitigate all potential threats of enemy action, and the events of 8 June 2018 are yet another example that even with solid planning, the enemy sometimes gets lucky. This is particularly true given the historical ineffectiveness and inaccuracy of AS IDF. (S) The ineffectiveness and inaccuracy of the IDF associated with the 6 June 2018 event fell in line with historic AS performance. (b)(1) 1.4a, (b)(1) 1.4c, (b)(3)10 U.S.C. § 130c b. <del>-(U//FOUO)</del>(b)(1)1.7e -(S//NF) During the enemy attack on 8 June 2018, USSOF had the best combination of available armed and unarmed ISR overhead. (b)(1)1.4a, (b)(1)1.4c <del>(U//FOUO)</del>(b)(1) 1.7e

In short, armed and unarmed ISR support was available and utilized to the full extent possible on 8 June 2018, but conditions on the ground combined with intermittent cloud cover made perfect situational awareness impossible.

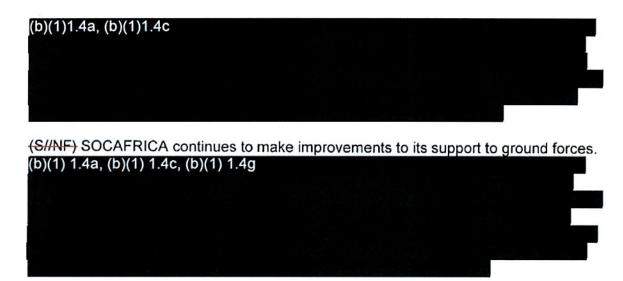
c. (U//FOUO) Variance between the witness statements describing the accuracy of the enemy indirect fire on 8 June 2018, and the graphic depiction of the points of impact on page six of the report.

(U//FOUO) Variance between witness statements describing the accuracy of the enemy IDF are a result of personnel trying to describe where they remember hearing a mortar land – during the commotion of an armed enemy engagement involving multiple friendly firing positions. The preponderance of USSOF on this operation were either inside a MATV or inside the confines of the newly constructed combat outpost walls. There were only two mortar impact areas observed and physically identified within the immediate vicinity of the combat outpost (page six of the report), the one at the northeast corner of the COP, and the one just outside the COP to the southeast. No impact areas were identified for the two remaining IDF locations shown on the graphic from page six; they are best guesses, based on reporting. There exists the possibility that there were more IDF rounds involved than were depicted on page six of the report, but the IDF rounds depicted are locations for which we had the highest level of confidence.



rimary method taught in approved Tactical Combat Casualty Care courses and curriculum endorsed by the American College of Surgeons and the DoD's Joint Trauma System's Committee for Combat Casualty Care. (b) (6) is taught as an approved option for clinicians to consider as an alternative. Emerging research suggests that the (b) (6) method may have increased success rates, but has not yet been recommended as the primary method.

e. (U//FOUO) Based on the findings and recommendations, implementation of any
corrective actions applicable to your (my) command and within your (my)
purview.



(U//FOUO) SOCAFRICA medical has already taken steps toward educating our forces on medical lessons learned from this operation, and have already begun coordination with SOCOM about a review of Critical Skills Requirements as they apply to (b) (6) procedural training inside our SOF pipelines, such as recommending that the(b) (6) technique due to its higher success rates. Once this 15-6 is released, an official memorandum will go out to SOCOM from our SOCAFRICA Surgeon's office. My Command Surgeon has already initiated informal discussions on the lessons learned from this incident with the SOCOM Surgeon. These include the challenges and biases associated with exclusively communicating medical risk in terms of evacuation times, and how the rapid transition of care through multiple phases of evacuation may get a patient to a surgeon faster (which is usually the performance metric during an evacuation), but might also inadvertently increase the risks of the care being provided.

- 2. (U//FOUO) I recommend that this report be disseminated to the following commands or agencies for review of the findings and recommendations pertaining to staffing, training, and equipping special operations forces:
  - a. (U//FOUO) Commands with forces directly involved with this incident:

# (b)(3)10 USC § 130b

b. (U//FOUO) Commands whose purview includes the staffing, training, and equipping of special operations forces:

US Special Operations Command US Army Special Operations Command Joint Special Operations Command

Air Force Special Operations Command Naval Special Warfare Command Marine Special Operations Command

3. (U//FOUO) As always, I am available for further discussion.

J. MARCUS HICKS Maj Gen, USAF

Commander

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## HEADQUARTERS UNITED STATES AFRICA COMMAND

OFFICE OF THE COMMANDER UNIT 29951 APO AE 09751-9951

14 March 2019

## MEMORANDUM FOR COMMANDER, U.S. SPECIAL OPERATIONS COMMAND AFRICA

SUBJECT: Army Regulation 15-6 Investigation into the Facts and Circumstances Surrounding the Death of Staff Sergeant Alexander Conrad in the vicinity of Combat Outpost Somalia on or about 8 June 2018

- I am returning the investigative report of the facts and circumstances surrounding the death of Staff Sergeant Conrad to you for further action.
- 2. In order to fully document the conditions during this event, the efforts to treat Staff Sergeant Conrad's wounds and the implementation of any corrective actions, additional reporting is required. Within 45 days, provide a written endorsement addressing the following:
- a. Assessment of the intelligence reporting on the likelihood of enemy contact and the efficacy of mitigation measures employed by the force in consideration of the assessed threat, particularly the enemy indirect fire attack on 6 June 2018;
- b. Availability, capability and utilization of armed and unarmed intelligence, surveillance and reconnaissance support during the enemy attack on 8 June 2018;
- c. Variance between the witness statements describing the accuracy of the enemy indirect fire on 8 June 2018, and the graphic depiction of the points of impact on page six of the report;

d. (b) (6)

- e. Based on the findings and recommendations, implementation of any corrective actions applicable to your command and within your purview.
- 3. Provide in your endorsement a recommendation for dissemination of the investigative report to other commands or agencies for review of the findings and recommendations pertaining to staffing, training and equipping special operations forces.

THOMAS D. WALDHAUSER General, U.S. Marine Corps

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## HEADQUARTERS SPECIAL OPERATIONS COMMAND AFRICA

UNIT 30401 APO AE 09107-0401

ACSO 19 February 2019

MEMORANDUM FOR Commander, Special Operations Command Africa, Unit 30401, APO AE 09107

SUBJECT: (U//FOUO) Army Regulation (AR) 15-6 Investigation Into the facts and circumstances surrounding the death of SSG Alexander Conrad in the vicinity of Combat Outpost (COP) Somalia on or about 8 June 2018.

## 1. (U//FOUO) Procedural Background:

a. (U//FOUO) On 25 June 2018, you appointed myself, (b) (6), (b)(3) 10 U.S.C.§130b), as the Investigating Officer, and (b) (6), (b)(3) 10 U.S.C.§130b) as the Assistant Investigating Officer, to conduct an informal investigation into the facts and circumstances surrounding the death of SSG Alexander Conrad in the vicinity of COP Somalia on or about 8 June 2018. Specifically, you asked me to, at a minimum, ascertain (1) the facts and circumstances surrounding the incident (including 5 W's); (2) the mission at the time of the incident and any pre-mission briefing concerning enemy forces and threats; (3) whether an up-to-date threat analysis was accomplished for the mission; (4) whether SSG Conrad was wearing personal protective equipment (PPE), what PPE he was wearing, and if not, the reason; (5) what, if any, medical treatment was provided to SSG Conrad, and whether the medical evacuation (MEDEVAC) procedures were timely and appropriate under the circumstances; (6) the nature and extent of the injuries to SSG Conrad; (7) what recommendations concerning improvement, if any, to tactics, techniques, and procedures may help to avoid this type of incident in the future; (8) any other matters pertaining to this incident that I deem relevant.<sup>2</sup>

b. (U//FOUO) On 16 July 2018, you appointed (b) (6), (b)(3) 10 U.S.C.§130b as an assistant Investigating Officer, with special technical knowledge as it applies to medical procedures, to assist with questioning witnesses, taking sworn statements, facilitating evidence gathering, interpreting evidence, and completing this report. While not formally excused, (b)(6)(b)(3)10 U.S.C.§130b no longer played an active role in the investigation after this appointment. The initial report was completed on 31 October 2018. The investigation was reopened on 27 November 2018 to elaborate on the initial findings and recommendations and explain the technical operational and medical details in the original report with the assistance of (b)(6),(b)(3) 10 U.S.C.§130b, Staff Judge Advocate. The

<sup>1</sup> Enclosure 1.

<sup>&</sup>lt;sup>2</sup> Enclosure 1.

<sup>&</sup>lt;sup>3</sup> Enclosure 2.

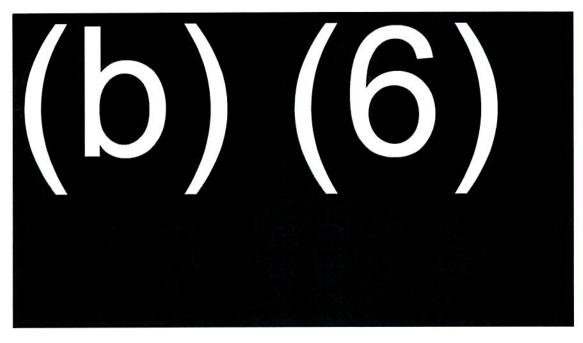
revised report was completed on 14 December 2018 and forwarded to U.S. Africa Command for endorsement.

- c. (U//FOUO) Following review of the initial findings by U.S. Africa Command, the draft report was returned to SOCAFRICA for clarification on certain provisions on 15 January 2019.
- 2. (U//FOUO) Summary of Findings: I find by a preponderance of the evidence that:
- a. (U//FOUO) SSG Alexander Conrad's death occurred in the line of duty and was the result of injuries sustained by a mortar round that impacted near his position during an Al-Shabaab (AS) attack on 8 June 2018, despite attempts to provide trauma care onsite and in-transit to the closest medical facility;
- b. (U//FOUO) SSG Conrad's death occurred during a mission to clear and hold an area near Source, Somalia, for the construction of a Combat Operating Post (COP) for use by partner forces in support of U.S. efforts to stabilize Somalia and remove the threat posed by the AS terrorist organization:
- c. (U//FOUO) An up-to-date threat analysis was performed specifically for the operation with enemy indirect fire (IDF) considered as a possible enemy action in mission planning;
- d. (U//FOUO) SSG Conrad was wearing all required Personal Protective Equipment (PPE), to include helmet and flak vest, at the time of the incident;
- e. (U//FOUO) SSG Conrad received medical treatment by Army Special Forces team medics, U.S. Air Force Personnel Recovery medics, a board eligible emergency medicine physician, and the Expeditionary Resuscitative Surgical Team (ERST) with care rendered at the scene of the incident and in transit to the Military Support Site (MSS) medical facility. All medical care, to include the MEDEVAC procedures, were timely and appropriate under the specific circumstances of this incident despite the fact that the autopsy later revealed that (b) (6)
  - f. <del>(U//FOUO)</del> SSG Conrad's injuries consisted of multiple ballistic injuries<sup>4</sup>, including:

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<sup>&</sup>lt;sup>4</sup> Exhibit WWW. Ballistic injuries are not specifically defined in the autopsy report, however, according to the Army Surgeon General publication, *Emergency War Surgery*, fragments of explosive munitions cause ballistic injuries and unlike small arms, explosive munitions cause multiple wounds.





h. (U//FOUO) In addition to the above, I also examined the following other matters I deemed relevant: 1) the nature of the intelligence, surveillance, and reconnaissance (ISR) support provided during the mission; 2) the medical procedures and training related to (b) (6) ; 3) the MEDEVAC capabilities and procedures used by the Air Force Personnel Recovery-Task Force; and 4) the configuration of the HH-60 Pave Hawk helicopter. It is my assessment that the circumstances of SSG Conrad's death demonstrates the need for improved standardization of MEDEVAC landing approaches, (b) (6) , more dedicated time for specific medical skills maintenance, review of the challenges presented by the HH-60 Pave Hawk helicopter to transport and treat multiple casualties, and review of the standard medic kit to include equipment that can confirm placement of an endotracheal tube within the airway.

3. (U//FOUO) Applicable Facts: I base my findings and recommendations on the following facts drawn from 55 interviews and additional documents obtained during the course of the investigation:

THE MISSION - PRE-MISSION BRIEFING - THREAT ANALYSIS

a. (S//NF) At the time of the incident, SSG Conrad was deployed to Somalia as a member of (DX1) 1.4a, (DX3) 10 U.S.C. § 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St.) 1.4a, (DX1) 10 U.S.C. § 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St.) 1.4a, (DX1) 10 U.S.C. § 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St.) 1.4a, (DX1) 10 U.S.C. § 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St.) 1.4a, (DX1) 10 U.S.C. § 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St.) 1.4a, (DX1) 10 U.S.C. § 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St.) 1.4a, (DX1) 10 U.S.C. § 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St.) 1.4a, (DX1) 10 U.S.C. § 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St.) 1.4a, (DX1) 10 U.S.C. § 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St.) 1.4a, (DX1) 10 U.S.C. § 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St.) 1.4a, (DX1) 10 U.S.C. § 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St.) 1.4a, (DX1) 10 U.S.C. § 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St.) 1.4a, (DX1) 10 U.S.C. § 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St. 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St. 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St. 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St. 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St. 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St. 1300, a unit within Special Operations Command Forward—East Africa (SOCFWD-EA). St. 1300, a unit within Special Op

# (b)(3)10 USC § 130c

b. (S//NF) The concept of operation (CONOP) for the mission that ultimately took place between 4-9 June 2018, called for to conduct a combined clearance and hold operation between 4-8 June 2018, in the vicinity of order to clear Al-Shabaab (AS) from contested areas, liberate villages from AS control, support partner force during COP construction, and increase the span of the FGS security and governance. The combined force was (b)(1) 1.4a, (b)(1) 1.4a, (b)(1) 1.4c, (b)(

c. (S//NF) The initial threat assessment for the operation that was set to take place in May 2018 considered the threat to (b)(1) 1.4a. (b)(1) 1.4c. (b)(1) 1.4q

(b)(1) 1.4a, (b)(1) 1.4c, (b)(1) 1.4g

<sup>5</sup> Exhibit DDD.

<sup>&</sup>lt;sup>6</sup> Exhibit III, see also

<sup>&</sup>lt;sup>7</sup> Exhibit DDD. The original mission was planned for 4-8 June, but due to the Troops in Contact (TIC) remained onsite until 9 June in order to complete the COP build plans.

<sup>&</sup>lt;sup>8</sup> Exhibit DDD.

<sup>9</sup> Exhibit III, slide 6

d. (S//NF) The intelligence overview for the operation that ultimately took place between 4 and 9 June did not change and still assessed that the threat to US Forces remained (b)(1)1.4a, (b)(1)1.4c 

10 Special Operations Command-Africa (SOCAFRICA) and US Africa Command (USAFRICOM) J2s both concurred with the risk assessment. 11

e. (S//NF) The mitigated risk to mission and risk to force were both assessed to be (b)(1)1.4a, (b)(1)1.4c Major mitigating measures taken included: Major mitigating measures taken included: (b)(1) 1.4a, (b)(1) 1.4c, (b)(3)10 USC § 130b

f. (U//FOUO) The (b) (6), (b)(3)10 USC § 130b stated that he never felt there was any change in the threat during his overall deployment to Somalia. He felt that the flooding that had taken place with the recent rainfall limited the ability of Al-Shabaab to attack on the main road. He also indicated that the enemy tactics did not change—(b) (6), (b)(1)1.7e, (b)(3) 10 U.S.C.§130b, (b)(3) 10 U.S.C.§130b

also felt that the intelligence was accurate, including the enemy most likely and most dangerous courses of action. He also noted that: (b)(1)1.7e, (b)(3) 10 U.S.C.§130

(b)(1)1.7e, (b)(3) 10 U.S.C.§130 (b)(1)1.7e, (b)(3) 10 U.S.C.§130

<sup>10</sup> Exhibit DDD, slide 6.

<sup>11</sup> Exhibit EEE.

<sup>12</sup> Exhibit DDD, slide 37.

<sup>13</sup> Exhibit OO

<sup>14</sup> Exhibit YY

<sup>15</sup> Exhibit TT

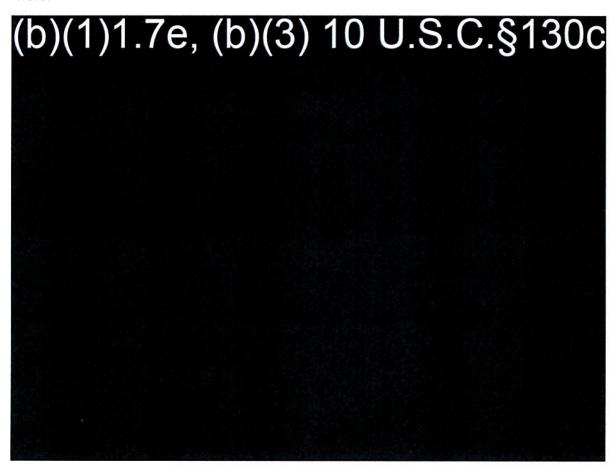
<sup>16</sup> Exhibits SS and TT

# (b)(1) 1.7e, (b)(3) 10 USC 130

THE FACTS AND CIRCUMSTANCES SURROUNDING SSG CONRAD'S INJURIES

h.-(U//FOUO) On 4 June 2018, the U.S. Force departed (b)(1)1.7e, (b)(3) 10 U.S.C.§130

USSOF and their partner forces arrived at Somalia, on 4 June 2018. The team conducted security and began building the COP. 19 A graphic display of the combined forces at COP is displayed here:



<sup>17</sup> See Exhibits D and CCC

<sup>18</sup> Exhibit N

<sup>19</sup> Exhibit DDD, VVV.

i. (U//FOUO) On 6 June 2018, (COL) received inaccurate IDF during COP construction. However, an IDF point of origin was not observed.<sup>20</sup> j. (U//FOUO) On 8 June 2018, at 1134Z, personnel at COP began to receive sporadic, inaccurate harassing small arms fire.<sup>21</sup> During this attack, between 1134Z and 1140Z (D)(6), (D)(3) 10 U.S.C.\$1300 - collocated with (D)(6),(D)(3) 10 U.S.C.\$1300, a linguist assigned to USSOF physically moved (b) (6), (b),(3) 10 U.S.C \$13000 to a place of cover behind a tire in the vicinity of the fuel point. (a) (5) (5) (5) 10 U.S.C.§ 1306 took his place of cover behind a nearby white structure approximately 10 feet west from the tire. (b) (6), (b)(3) 10 U.S.C.§130b moved to the tire where (b) (0, (e)(2) 10 USC \$1300 was located (b) (0, (e)(2) 10 USC \$1300 repositioned (b) (0, (e)(2) 10 USC \$1300 repositioned (c) (e)(2) 10 USC \$1300 repositioned the most eastern part of the tire so that could fire his weapon in the direction of the enemy contact to the southeast. 22 k. (S//NF) In addition to the small arms fire, mortars also began impacting in the vicinity of COP at 1137Z, with rounds impacting inside the COP structure and adjacent to it.<sup>23</sup> Immediately after initial mortar impact, (b) (6), (b)(3) 10 U.S.C.§130b attempted to notify the SOCFWD-EA Joint Operations Center (JOC) of the Troops in Contact (TIC) (5) (6), (6)(3) 10 U.S.C.§1306, (6)(1)1.4a, (6)(3) 10 U.S.C.§13 (U//FOUO) Between 1140Z and 1145Z a mortar round impacted southwest of COP in the vicinity of where SSG Conrad, (b) (6), (b)(3) 10 U.S.C.§130b were located. Immediately following impact, (b) (6), (b)(3) 10 U.S.C.§1300 (wounded) and (b) (6), (b)(3) 10 U.S.C.§1300 (wounded) observed (wounded) had severe bleeding from the left side of his forehead.<sup>26</sup> walked with miscerphoses toward a Military All-Terrain Vehicle (MATV) west of COP in order to establish the Casualty Collection Point (CCP).27 A call for medics by (b) (6), (b)(3) 10 U.S.C.§130b went out over internal communications; (b) (6), (b)(3) 10 U.S.C.§130b and former combat medic, saw (b)(6),(b)(1) and (b)(6),(b)(3) 10 U.S.C.\$(150)

and moved toward them in order to help with injuries.<sup>28</sup> (b) (6), (b)(3) 10 U.S.C.§130b saw<sup>(b)</sup>(6), (b)(3) 10 U.S.C.§130b and saw<sup>(b)</sup>(6), (b)(3) 10 U.S.C.§130b assisting with SSG Conrad's (severely

<sup>20</sup> Exhibits FFF, Q.

<sup>&</sup>lt;sup>21</sup> Exhibit FFF, and GGG; see also Exhibits D, E, F, G, H, N, R, S, T, CC, DD, EE, FF, GG, HH, II, JJ, KK, LL, MM, NN, OO, PP, QQ, RR, SS, TT, UU, VV, WW, XX, YY, ZZ, AAA, BBB.

<sup>22</sup> Exhibit SSS, VVV.

<sup>23</sup> Exhibit FFF.

<sup>24</sup> Exhibit XX.

<sup>&</sup>lt;sup>25</sup> Exhibit FFF, see also Exhibits D, E, F, G, H, N, R, S, T, CC, DD, EE, FF, GG, HH, II, JJ, KK, LL, MM, NN, OO, PP, QQ, RR, SS, TT, UU, VV, WW, XX, YY, ZZ, AAA, BBB.

<sup>26</sup> Exhibits S. MM, OO, PP, TT.

<sup>&</sup>lt;sup>27</sup> Exhibits CC, DD, MM, OO.

<sup>28</sup> Exhibits CC, MM, OO.

wounded) movement to the CCP; was alerted by was alerted by Conrad needed help.<sup>29</sup> that SSG

## NATURE AND EXTENT OF SSG CONRAD'S INJURIES, MEDICAL TREATMENT PROVIDED, AND MEDEVAC TIMELINESS

m. (Ut/FOUO) After moving to SSG Conrad's location, Display 1909 SSG Conrad to the CCP to begin rendering medical care. Three medics—

[b) (6), (b)(3) 10 U.S.C.§130b—and an EOD technician, Conrad while a request for MEDEVAC was made. The COP was still under attack by enemy forces. The Copy of the Copy of

<sup>29</sup> Exhibit DD.

<sup>30</sup> Exhibit DD.

<sup>31</sup> Exhibit DD, see also Exhibits N

<sup>&</sup>lt;sup>32</sup> Exhibits D, E, F, G, H, N, R, S, T, CC, DD, EE, FF, GG, HH, II, JJ, KK, LL, MM, NN, OO, PP, QQ, RR, SS, TT, UU, VV, WW, XX, YY, ZZ, AAA, BBB.

<sup>33</sup> Exhibit DD

<sup>34</sup> Exhibit G

<sup>35</sup> Exhibit DD

<sup>36</sup> Exhibit N

<sup>37</sup> Exhibits N and DD

<sup>38</sup> Exhibits N and DD

(b) (6), (b)(3) 10 U.S.C.§130b

(b) (6), (b)(3) 10 U.S.C.§130b (b) (6), (b)(3) 10 U.S.C.§130b

(b) (6), (b)(3) 10 U.S.C.§130b (b) (6), (b)(3) 10 U.S.C.§130b

(b) (6), (b)(3) 10 U.s.c.§130b (b) (6), (b)(3) 10 U.S.C.§130b

q. <del>(U//FOUO)</del> Upon receiving the TIC notification at aircraft began mission launch preparations. Two helicopters took off within 6-10 mins of the initial TIC report.<sup>47</sup> **(b) (6), (b)(3) 10 U.S.C.§130b** 

began preparing mission medical equipment on the trail helicopter, including prepping Y-tubing for blood administration, and drawing up medications

<sup>39</sup> Exhibit N.

<sup>40</sup> Exhibits G, N, DD.

<sup>41</sup> Exhibit EE.

<sup>42</sup> Exhibit N, DD.

<sup>43</sup> Exhibits G, N, CC, DD.

<sup>44</sup> Exhibit N.

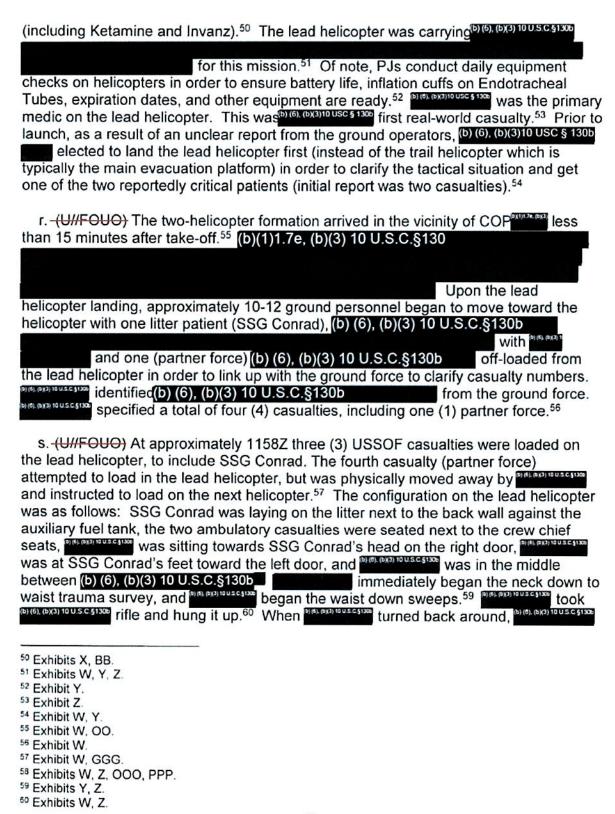
<sup>45</sup> Exhibit DD.

<sup>46</sup> Exhibit CC.

<sup>47</sup> Exhibits W, X, Y, Z, AA, BB.

<sup>48</sup> Exhibits W. Y.

<sup>49</sup> Exhibits X, AA, BB.



## (b) (6), (b)(3) 10 U.S.C.§130b (b) (6), (b)(3) 10 U.S.C.§130b 65 The flight from COP was less than 15 minutes. During the return flight to (b)(1)1.7e. (b)(3) 10 U.S.C.§130 from COP (b)(1)1.7e, (b)(3) 10 U.S.C.§130 however, that added to the difficulty of the medical work.66 t. (U//FOUO) At 1218Z, upon landing at MSS the litter bearers (non-ERST personnel) on the ground pulled SSG Conrad away from while he was still bagging, disconnecting the BVM momentarily. Processing reconnected the BVM.67 followed SSG Conrad's litter, and provided a verbal report to the ERST nurse while turning SSG Conrad over to ERST.68 u. (U//FOUO) SSG Conrad was placed in the resuscitation bay at MSS where he was met by ERST members. (b) (6), (b)(3) 10 U.S.C.§130b for the ERST, was at the head of the bed. (b) (6), (b)(3) 10 U.S.C.§130b 6), (b)(3) 10 U.S.C.§130b 61 Exhibit Z. 62 Exhibit W. 63 Exhibit Z. (b)(3) 10 USC 130, (b)(1) 1.7e

Exhibit Z.
 Exhibits Y, Z.
 Exhibit W.

68 Exhibits J. Z.

67 Exhibit W. FFF, GGG.

used by spice (sp) is used too on the MEDEVAC.

<sup>11</sup> 

## (b) (6), (b)(3) 10 U.S.C.§130b

(b) (6), (b)(3) 10 U.s.c.§130b (b) (6), (b)(3) 10 U.s.c.§130b

w.-(U//FOUO) SSG Conrad's autopsy was conducted on 13 June 2018, and concluded that he died as result of "multiple ballistic injuries." (b)(6),(b)(3)10 U.S.C.§130b (b) (6), (b)(3) 10 U.S.C.§130b

## SSG CONRAD'S PERSONAL PROTECTIVE EQUIPMENT

x. (U//FOUO) According to the medics who treated SSG Conrad, at the time of this incident at COF SSG Conrad was wearing all required Personal Protective Equipment – Helmet, Body Armor, and Eye Protection. (b) (6), (b)(3) 10 U.S.C.§130b helped move SSG Conrad to the CCP; shortly after 1145Z with help from bifole(x) 10 U.S.C.§130b removed SSG Conrad's PPE at the CCP in order to provide him medical assistance.<sup>73</sup>

## OTHER MATTERS RELEVENT TO THIS INCIDENT

y. (U//FOUO) (b)(3)10 USC § 130e did not observe enemy activity the day of the attack. The platforms scanned the area before, during and after the attack and never observed enemy activity.<sup>74</sup>

(b)(1) 1.4a, (b)(1) 1.4c, (b)(3)10 USC § 130e (b)(1) 1.4a, (b)(1) 1.4c, (b)(3)10 USC § 130e

<sup>69</sup> Exhibit J.

<sup>70</sup> Exhibits J. O.

<sup>71</sup> Exhibit J.

<sup>72</sup> Exhibits K, L, KKK.

<sup>73</sup> Exhibit G. DD, PP.

<sup>74</sup> Exhibits B. C. TT. XX, AAA.

<sup>75</sup> Exhibits B, C, TT, XX, AAA.

## aa. <del>(S//NF)</del> (b)(1) 1.4a, (b)(1) 1.4c, (b)(3) 10 U.S.C. § 130b )(1)1.4c

bb. (S//NF) As noted above, (S/INF) As noted above, (SI)144,((S))16035533300 originally planned this operation for 7-11 May 2018. SOCFWD-EA leadership travel initially delayed CONOP approval. 77 Between the originally planned date of execution, 7-11 May 2018, and the actual date of execution, 4-9 June 2018, a large storm hit Somalia causing flooding in the vicinity of the area planned for COP The delay in operation execution created space and time for the levees to be sabotaged, causing further flooding in the fields and over the roadway in the vicinity of COP As June approached, the unusually heavy

rainfall added to the flooding, causing many villagers to flee local towns. 80 (D)(1) 1.4a, (D)(1) 1.4c, (D)(3)10 U.S.C. § 130c

requested SSG Conrad for the operation in order to assist in cc. -(S//NF) and training of the partner force's intelligence capabilities. He assisted (b)(1)144 (b)(3) 10 USC \$ 1300 with those tasks as a trained subject matter expert in (b)(1)1.4a

ee. (S//NF) Post-attack EOD analysis produced evidence of the introduction of improvised mortars to the AS inventory (b)(1)1.4a

<sup>76</sup> Exhibits TT & XX.

<sup>77</sup> Exhibit III.

<sup>78</sup> Exhibits OO, XX, III, JJJ.

<sup>79</sup> Exhibit XX.

<sup>80</sup> Exhibit XX & JJJ.

<sup>81</sup> Exhibit OO, TT, XX.

<sup>82</sup> Exhibit XX.

<sup>83</sup> Exhibits OO, TT, VV, XX.

<sup>84</sup> Exhibits XX, HHH.

<sup>85</sup> Exhibits D. E. F. G. H. HHH.

## (b)(1)1.4a

ff. (U//FOUO) The Joint Special Operations Medical Training Center (JSOMTC) as well as the Committee on Tactical Combat Casualty Care (CoTCCC) recommend the

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

## gg. <del>(U//FOUO)</del> (b) (6)

Conditions faced by SSG Conrad and the medical personnel supporting the COP build were far from ideal – enemy fire, enemy mortars, mud, fatigue, constrained space on helicopters, stress, etc. This demonstrates the difficulty of the procedure itself.

## 4. (U) Regulatory Authority and Legal Standards

a. (U) Army Regulation 15-6, para. 3-10, b., provides that findings must be supported by a greater weight of evidence than supports a contrary conclusion—in other words, by a preponderance of the evidence. Furthermore, the weight of the evidence is not determined by the number of witnesses or volume of exhibits, but by considering all the evidence and evaluating factors such as the witness's demeanor, opportunity for knowledge, information possessed, ability to recall and relate events, and other indications of veracity.

## 5. (U) Findings.

a. (U//FOUO) Finding #1: SSG Alexander Conrad's death occurred in the line of duty and was the result of injuries sustained by a mortar round that impacted near his position during an Al-Shabaab attack on 8 June 2018, despite attempts to provide trauma care on-site and in-transit to the closest medical facility;

-(U//FOUO) ANALYSIS: Multiple witness statements confirm that SSG Conrad received his injuries as the direct result of a mortar round impacting near his location during an attack by Al Shabaab fighters between 1140Z and 1145Z on 8 June 2018. Despite efforts by trained medics at the scene of injury, on board the MEDEVAC helicopter, and

<sup>86</sup> Exhibit D, HHH.

<sup>87</sup> Exhibit LLL.

<sup>88</sup> Exhibit N, DD, LLL.

<sup>89</sup> Exhibit TTT.

the surgery team at the ERST, SSG Conrad succumbed to his injuries and was declared deceased at 1232Z. (b) (6) Based on all relevant witness statements and the autopsy findings, it appears that despite the rapid care provided, (b) (6) and SSG Conrad's vital signs ceased at some point during his transportation from the MEDEVAC helicopter to the Medical Tent at MSS (NOTICE (NOTIONAL) where he had no vital signs upon entry to the resuscitation bay. 90 The last known vitals were taken enroute to the ERST by the Air Force PJs. It should be noted that the total time elapsed between the initial point of injury and called time of death was approximately 47 to 52 minutes. In addition, all care rendered prior to departure on the MEDEVAC platform was done under enemy fire in the span of 20-25 minutes between time of injury and SSG Conrad being loaded onto the helicopter for transport. All of these factors taken together suggest that there was no way the personnel who treated SSG Conrad could have known that their efforts were not successful in saving SSG Conrad's life.

b. (U//FOUO) Finding #2: SSG Conrad's death occurred during a mission to clear and hold an area near Somalia, for the construction of a Combat Operating Post (COP) for use by partner forces in support of U.S. efforts to stabilize Somalia and remove the threat posed by the terrorist organization, Al-Shabaab;

c. (U//FOUO) Finding #3: An up-to-date threat analysis was performed specifically for the operation with enemy indirect fire (IDF) accounted for as possible enemy action in mission planning;

<sup>90</sup> Exhibit I

<sup>91</sup> Exhibit VV

<sup>92</sup> Exhibit OO

(S//NF) ANALYSIS: The pre-mission planning briefing indicated that the unmitigated

(b)(1)1.4a, (b)(1)1.4c (b)(1)1.4a, (b)(1)1.4c

d. -(U//FOUO) Finding #4: SSG Conrad was wearing all required PPE equipment, to include helmet and flak vest, at the time of the incident;

-(U//FOUO) ANALYSIS: The medics who treated SSG Conrad on-site noted in their statements that SSG Conrad was wearing all required PPE at the time of treatment. They stated that the PPE (helmet and flak vest) was removed to assess his wounds and specifically to dress the wounds to his chest and armpit.<sup>96</sup> There is no evidence that the PPE was defective.

e. (U//FOUO) Finding #5: SSG Conrad received medical treatment by Army Special Forces team medics, U.S. Air Force Personnel Recovery medics, a board eligible emergency medicine physician, and the Expeditionary Resuscitative Surgical Team (ERST), with care rendered at the scene of the incident and in transit to the MSS medical facility. All medical care, to include the MEDEVAC procedures, were timely and appropriate under the specific circumstances of this incident despite the fact that the autopsy later revealed that

(b) (6)

(U//FOUO) ANALYSIS: Witness interviews establish that SSG Conrad received treatment from multiple qualified personnel within minutes of his injury and continuously from initial treatment to the declaration of death by the trauma team doctor. The specific treatment is detailed above. (b) (6)

specific treatment is detailed above. (b) (6)

<sup>93</sup> Exhibit DDD

<sup>94</sup> Exhibits WW and YY

<sup>95</sup> Exhibit D. HHH.

<sup>96</sup> See Exhibits G and DD

(b) (6)
(b) (6)
Statements suggested that any person who provided care was derelict in the performance of the medical care rendered to SSG Conrad in the short space of time between the time of injury and his arrival to the Expeditionary Resuscitative Surgical Team (approximately 47-52 minutes). (b) (6)

f. (U//FOUO) Finding #6: SSG Conrad's injuries consisted of multiple ballistic juries 97 (b) (6)



(U//FOUO) ANALYSIS: SSG Conrad's autopsy confirmed the witness testimony that SSG Conrad was injured in the face/neck area, chest area, and left knee by fragments from an exploded mortar round, 98 (b) (6)

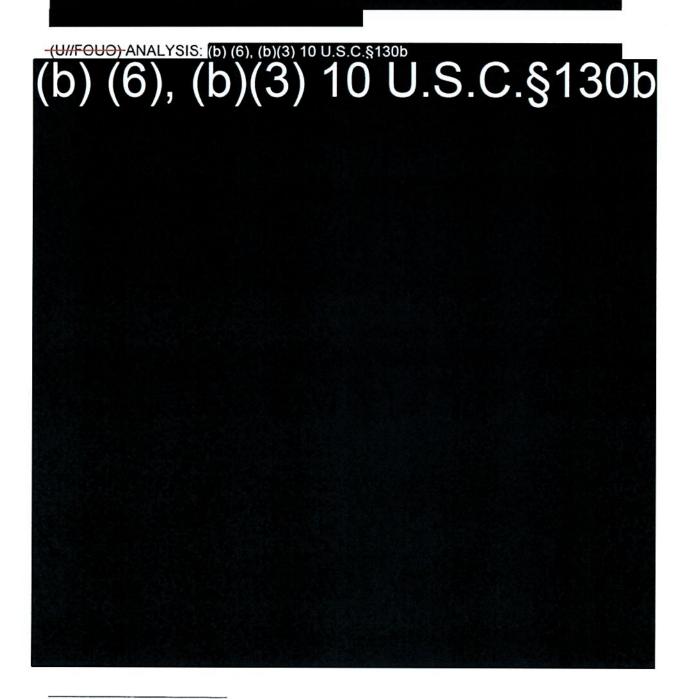
(b) (6)

(b) (6) The autopsy findings are consistent with the witness statements of those who rendered medical care.

g. <del>(U//FOUO)</del> Finding #7: (b) (6)

<sup>&</sup>lt;sup>97</sup> Exhibit WWW. Ballistic injuries are not specifically defined in the autopsy report, however, according to the Army Surgeon General publication, *Emergency War Surgery*, fragments of explosive munitions cause ballistic injuries and unlike small arms, explosive munitions cause multiple wounds.
<sup>98</sup> See Exhibits N and DD

(b) (6)



<sup>99</sup> Exhibit Z

<sup>100</sup> Exhibits W and Z

<sup>101</sup> Exhibit I

<sup>102</sup> Exhibit J



## 6. (U) Additional Findings

a. (U) In addition to the above, I also find that several additional factors might have contributed to the sequence of events on 8 June 2018:

(1) (U//FOUO) Intelligence Surveillance and Reconnaissance (ISR) Platforms:

# (b)(3)10 USC § 130e

(2) (U//FOUO) Medical Procedures:

(a) (U//FOUO) Combat casualty care in the pre-hospital environment is more challenging than in-hospital care due to the dynamic and uncontrolled nature of the combat environment. Myself and (b) (6), (b)(3) 10 U.S.C.§130b met with (b) (6), (b)(3) 10 U.S.C.§130b and at the JSOMTC in order to gain insight on (b) (6) being taught to USSOF medics prior to deployment. An Interview with the JSOMTC lead instructor, (b) (6), (b)(3) 10 U.S.C.§130b, revealed that during the surgical block of instruction,



(3) (U//FOUO) JSOMTC curriculum was observed with solution of the (b) (6)

<sup>103</sup> Exhibit I

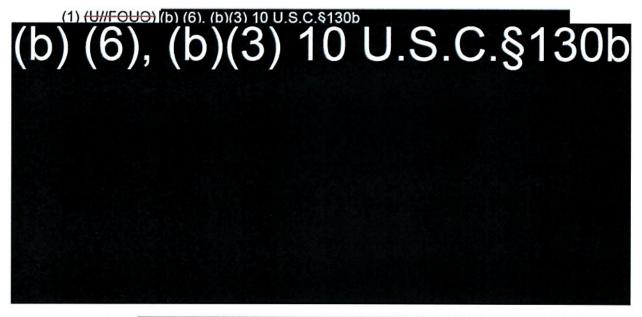
<sup>104</sup> Exhibits B, C, TT, AAA.

<sup>105 (</sup>b) (6)

<sup>106</sup> Exhibit NNN

b. (U//FOUO) As noted throughout this report, the use of (b) (6)

c. (U//FOUO) MEDEVAC Procedures



(b) (6), (b)(3) 10 U.S.C.§130b (b) (6), (b)(3) 10 U.S.C.§130b

<sup>107</sup> Exhibit Z and J.

<sup>108</sup> Exhibit QQQ.

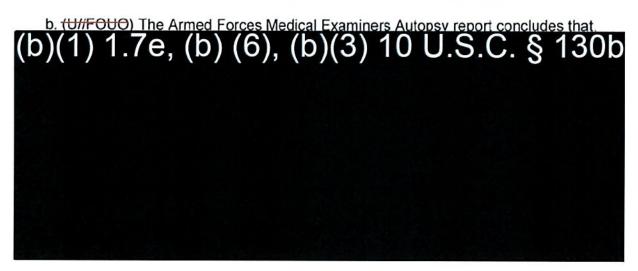
<sup>109</sup> Exhibit RRR.

(b) (6)

e. (U//FOUO) With multiple casualties and auxiliary fuel tanks, the Pave Hawk compartment size limits performance of critical medical interventions. The space is tight, and would have been made even tighter during SSG Conrad's evacuation with the addition of body armor and weapons worn by the PJs (required), and body armor and weapons worn by two additional patients (b) (6), (b)(3) 10 U.S.C.§130b 110 Despite this, I still conclude that additional space on the Pave Hawk would not necessarily have made a difference for the treatment of SSG Conrad.

## 7. (U) Conclusions

a. (U//FOUO) Given the specific facts and circumstances of this incident, I find that no rules or regulations were violated that caused SSG Alexander Conrad's death. I do not find that any individual, unit, or organization acted in a negligent manner during mission planning, execution, or in the provision of medical care to SSG Conrad. SSG Conrad's death was the unfortunate result of injuries sustained from an enemy mortar round despite extensive efforts to provide trauma care under the duress of enemy fire and a rapid evacuation of the wounded.<sup>111</sup> Further, I conclude that the duress of enemy fire and a rapid evacuation of the wounded.<sup>111</sup> Further, I conclude that arms and mortars, and took all reasonable and possible steps to prepare for this type of contingency. SSG Conrad's injuries occurred despite the fact that he was wearing all required PPE equipment at the time of the incident. Based on witness testimonies and research into the procedures performed, I conclude that all medical and MEDEVAC procedures were timely and appropriate under the circumstances, but can nonetheless be improved.<sup>112</sup>



<sup>110</sup> Exhibits OOO, PPP.

<sup>111</sup> Exhibits UUU, WWW.

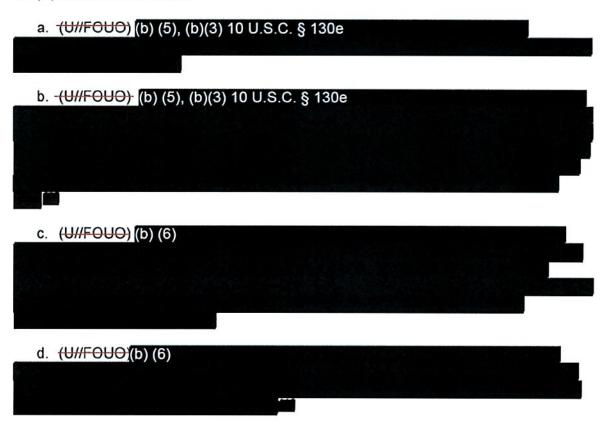
<sup>112</sup> Exhibits G, DD, PP.

<sup>113</sup> Exhibit WWW.

<sup>114</sup> Exhibit LLL.

# (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b, (b) (6)

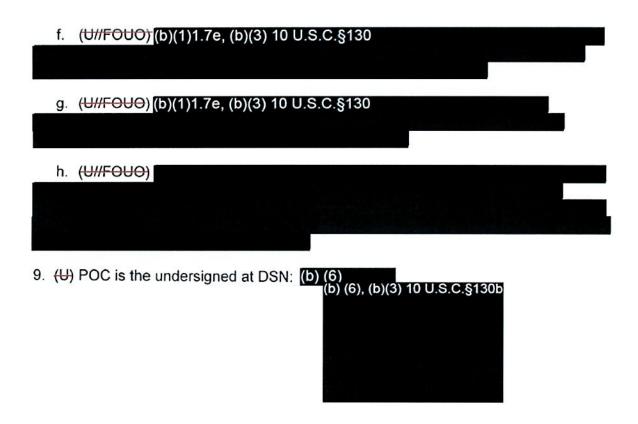
8. (U) Recommendations



e. (U//FOUO) Consideration should be placed on embedding PJs (or other combat medical equivalent) with the ground force during extended operations, particularly during cases like the one focused on for this incident involving more than 900+ personnel (USSOF and partner force).

<sup>115</sup> Exhibits TT, AAA.

<sup>116</sup> Exhibit TTT, pgs. 4-7.



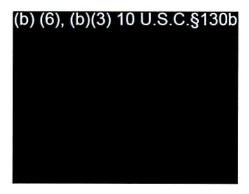
## Enclosures:

- 1. IO Appointment Memorandum, 25 Jun 2018
- 2. Assistant IO Appointment Memorandum, 16 July 2018
- 3. Extension Request to 10 August 2018, 12 July 2018, with Approval
- 4. Extension Request to 24 August 2018, 26 July 2018, with Approval
- 5. Extension Request to 14 September 2018, 15 August 2018, with Approval
- Request for Autopsy Report, 19 July 2018
- 7. Request for Private Medical Information, 26 July 2018
- 8. Extension Request to 03 October 2018, 28 September 2018, with Approval
- 9. Investigation Timeline
- 10. Initial Report and SOCAFRICA Approval, with Unclassified Summary, 31 October 2018
- 11. Request to Reopen Investigation, 28 November 2018

- f. (U//FOUO) The US Air Force should consider always landing the trail helicopter, loaded with three (3) PJs wholly focused on providing medical care, first this is the rehearsed protocol with the ground force prior to operation execution.
- g. (U//FOUO) Whenever possible, a critically injured casualty with ongoing interventions should be the only casualty placed on a HH-60 Pave Hawk with the auxiliary fuel tanks due to the extremely confined spaces.



9. (U) POC is the undersigned at DSN: (b) (6)



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#### Exhibits: A. Sworn Statement of (b) (6), (b)(3) 10 U.S.C. § 130e 08 August 2018 Sworn Statement of (b) (6), (b)(3) 10 U.S.C. § 130e 25 July 2018 B. C. Sworn Statement of (b) (6), (b)(3) 10 U.S.C. § 130e 06 August 2018 D. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 26 July 2018 Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 01 July 2018 E. F. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 09 August 2018 Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 25 July 2018 G. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 24 August 2018 H. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 29 July 2018 ١. J. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 31 July 2018 Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 01 August 2018 K. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 12 July 2018 L. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 15 August 2018 M. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 06 August 2018 N. Ο. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 23 August 2018 P. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 12 July 2018 Q. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 09 August 2018 R. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 07 July 2018 S. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 09 July 2018 T. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 29 June 2018 U. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 12 September 2018 V. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 12 September 2018 Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 30 July 2018 W Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 20 August 2018 X. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 23 August 2018 Y. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 13 September 2018 Z. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 20 August 2018 AA. BB. Sworn Statement of (b) (6), (b)(3) 10 U.S.C.§130b 24 August 2018 CC. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 16 August 2018 DD. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 27 August 2018 Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 16 August 2018 Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 16 August 2018 FF. GG. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 19 July 2018 HH. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 20 July 2018 Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 30 June 2018 11. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 20 July 2018 JJ. KK. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 27 July 2018 Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 19 July 2018 MM. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 27 August 2018 NN. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 19 July 2018 OO. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 18 July 2018

PP. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 23 July 2018 QQ. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 10 July 2018 RR. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 05 August 2018

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SS. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 02 August 2018
TT. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 23 July 2018
UU. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 28 June 2018
VV. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 15 August 2018
WW. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 27 June 2018
XX. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 29 June 2018
YY. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 15 August 2018
77
      Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 21 July 2018
AAA. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 11 September 2018
BBB. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3) 10 U.S.C. § 130b 27 July 2018
CCC. Sworn Statement of (b) (6), (b)(1) 1.7e, (b)(3)10 U.S.C. § 130c 11 July 2018
DDD. SECTION COPERTY COPERTY CONSTRUCTION CONOP (04-08JUN18)
EEE. Email: (04-08JUNE18)

FFF. Storyboard: (4-9 JUN18)
GGG.CASEVAC MISREP, 08 June 2018
                                 Operation (4-9 June)
HHH. EOD Storyboard for COP
      Original CONOP Submission (7-11 May) & Email Coordination, 03 May 2018
JJJ. Weather Forecast May to June 2018
KKK. Resuscitation Report for SSG Alexander Conrad, 08 June 2018
LLL. (b) (6)
                                                                        , 17 May 2018
MMM.(b) (6)
                                                                    03 February 2017
NNN. EMMA Device Cost Estimate, 10 September 2018
OOO. Helicopter Configuration Example, Rear View
PPP. Helicopter Configuration Example. Side View
RRR. Tactical Combat Casualty Care Quick Reference Guide, 2017
SSS. Memorandum for Record, Interviews with (b)(1)1.7e, (b)(3) 10 U.S.C.§130, 01 October 2018
TTT. (b) (6)
                                                                              2013
UUU. Detailed Medical Treatment Provided to SSG Alexander Conrad
VVV. COP
              Geometry
WWW. Autopsy Report for SSG Alexander Conrad, 10 August 2018
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