

WITNESS STATEMENT

For use of this form, see AR 195-10 - TB PMG 3; the proponent agency is Office of the Provost Marshal General.

PLACE Btry A, 2d Bn (HERC), 52d Arty, Everglades National Park, FL	DATE 1036 Hours	TIME 10 Jan 1970	FILE NUMBER 69-CID193-12737
LAST NAME, FIRST NAME, MIDDLE NAME BOYD, George Cecil	SOCIAL SECURITY ACCOUNT NO.		GRADE SP4
ORGANIZATION OR ADDRESS Btry A, 2d Bn (HERC), 52d Arty, Everglades National Park, FL 33030			

SWORN STATEMENT

I, SP4 George C. BOYD, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

Q: Specialist BOYD, I (1st SINQUEFIELD) have received information that you have knowledge of SP4 Frank SMITH of your battery possessing or selling marihuana. Is this true?

A: I have become very well acquainted with Frank SMITH since he has been here and have had numerous conversations with him. During conversations with Frank he has made statements to me that he "had grass at his apartment" and he also talked about getting "grass" around to people and during these conversations with him he mentioned FINERAN's name.

Q: Did SMITH ever tell you that he was selling marihuana?

A: He only said that he had it.

Q: Did you ever see SMITH in possession of what you thought to be marihuana?

A: No, I didn't.

Q: Did SMITH ever offer marihuana to you?

A: No he didn't.

Q: Did SMITH ever tell you that he had used marihuana?

A: No, he never told me that he used it.

Q: Do you wish to add anything to this statement?

A: No, I don't. *ACE*

////////////////////////////////////NOTHING FOLLOWS////////////////////////////////////

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT <i>ACE</i>	PAGE 1 OF <u>2</u> PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF ___ TAKEN AT ___ DATED ___ CONTINUED." THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE ___ OF ___ PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

DA FORM 2823
JAN 68

with
Exhibit 3

AFFIDAVIT

I, SP4 George C. BOYDHAVE READ ~~OR HAVE READ~~ OR HAVE READ THIS STATE-

MENT 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.

WITNESSES:

George C. Boyd
(Signature of Person Making Statement)

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 10th day of January, 1970
at Btry A, 2d Bn (HHC), 52d Arty

ORGANIZATION OR ADDRESS

James D. Simpsonfield
(Signature of Person Administering Oath)

JAMES D. SIMPSONFIELD, Crim Inves

(Typed Name of Person Administering Oath)

ORGANIZATION OR ADDRESS

ART 136 (b) (1) UCMJ 1969

(Authority To Administer Oaths)

INITIALS OF PERSON MAKING STATEMENT

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