

# **Exhibit 31**

UNCLASSIFIED // FOR PUBLIC RELEASE

**From:** [redacted]**To:** [redacted]**Cc:** [redacted]**Bcc:****Subject:** Re: [redacted] RDG Tasking for IC Psychologists Jessen and Mitchell**Date:** 6/20/2003 5:23:29 PM

[redacted]

Thank you for the thoughtful and helpful reply. I have appended notes in blue to each of the points below. Following our meeting with you on Monday, I met with the ICs and adjusted their work plan based on some of your suggestions/comments [redacted]. I also informed the ICs that: A) I had coordinated the work plan with OMS; B) OMS staff will be helping us evaluate the various project results and deliverables; and C) a member of the OMS staff will soon be assigned to RDG and become a focal point for psychological support to the HVTI program. The ICs accept this and will work with whomever we identify. Hope this clarifies the important role of OMS psychology in our program. When I have re-drafted the work plan and coordinated it with RDG, I will send you a copy.

FYI, the ICs will continue to report to [redacted] and I on strategic consulting projects (that is, the work plan), while remaining under the direct operational supervision of C/RDG [redacted] and DC/RDG [redacted]. To be clear, [redacted] and I are responsible for deciding which strategic projects the ICs carry out, but C/RDG and his deputy are responsible for how, when, where, and for how long the ICs deploy, and in what capacity. Except for this deployment to [redacted]-which is a legacy of my stewardship of RDG--the ICs will answer to RDG.

As a result of our discussions and your further input here, we would like to meet with you again soon to discuss the range of psychological and medical issues, including those raised below. C/RDG informs that he will contact you and set up a time. Thanks for all your help. [redacted]