Bomb builders
Airmen build the ‘smart’ into bombs

Double time
Balad medics treat more Iraqis, fewer U.S. troops
Complacency = trouble

For those big on counting down their days at Balad Air Base, it is probably getting to be a small number for many. As your deployment draws to a close, please remember the ramifications of your actions can follow you whether they are good or bad.

Combat surgeons

During a 24-hour shift that began at 7 a.m. Aug. 7, Air Force Maj. (Dr.) Steve Barnes treated 18 patients with injuries that varied from a crushed foot to multiple improvised explosive device penetrations, as well as gunshot wounds through the thigh and head.

Double time

Air Force Theater Hospital records here indicate that in the past year the number of injured Iraqis is increasing while U.S. casualties are beginning to decrease.

Cover Story

Bomb builders

Hitting a two-meter target with 2,000 pounds of high explosives while traveling hundreds of miles an hour takes sophisticated weapons aboard sophisticated aircraft flown by talented pilots.

Weather outlook

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<th>Day</th>
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The Wing Commander Wants to Hear from You

As a service for Balad Airmen, the 332d Air Expeditionary Wing operates the Commander’s Action Line.

The line is a way for Balad Air Base members to get answers to questions or express concerns about life on the base. Brig. Gen. Robin Rand, 332d AEW commander, gives action line queries his personal attention. The Red Tail Flyer will publish those items that are of general interest to the Balad Air Base population.

In addition to using the commander’s action line, Balad Airmen are asked to remember their chain of command when dealing with problems and concerns.

The action line can be reached via e-mail at 332.redtailflyer@blab.centaf.af.mil. People using the action line should include name, unit and phone number in case additional information is needed and for a timely response.

The Red Tail Flyer is published by the 332d Air Expeditionary Wing Public Affairs Office. This funded Air Force newsletter is an authorized publication for members of the U.S. military services overseas. Contents of the Red Tail Flyer are not necessarily the official views of, or endorsed by, the U.S. Government, the Department of Defense or the Department of the Air Force.

The editorial content is edited, prepared and provided by the public affairs office of the 332d AEW at Balad Air Base, Iraq. All photos are Air Force photos, unless otherwise indicated. The deadline for all editorial submissions is noon Friday the week prior to the date of publication. The public affairs office can be contacted at 443-6005, or by e-mail at 332.redtailflyer@blab.centaf.af.mil or 332aew.pa@ blab.centaf.af.mil. The crimson used throughout the publication alludes to the original Tuskegee Airmen of the 332d Fighter Group.

The Tuskegee Airmen were the first African Americans to be trained as WWII military pilots in the U.S. Army Air Corps. They were known as the Red Tail Flyers because of the crimson paint scheme on their aircraft’s tails.

For those big on counting down their days at Balad Air Base, it is probably getting to be a small number for many. As your deployment draws to a close, please remember the ramifications of your actions can follow you whether they are good or bad.

Airmen have been making great strides in improving the base and leaving it better for those who follow. A truly admirable feat! Regardless of where you work, we are members of team and guided by the same Air Force standards.

Let's all go out with fond memories and a sense of mission accomplishment. Don't do anything to tarnish your record in these final days.

Oftentimes Airmen make new friends during their deployment, which is a good thing. Some may even consider these friends as more than a friend.

Remember, however, that there are still rules to follow. An amendment to General Order 1A prohibits “visitation by persons of the opposite gender to an Air Force member's sleeping quarters.”

General Order 1A provides clear guidance as to what Airmen should not be doing, and looking for a loophole in the rule or guidance many times results in trouble. If sexual assault is brought up in an unrestrict ed report, an investigation will ensue, and those found perpetrating sexual assault will be prosecuted.

Even in a deployed combat environment, in approximately half of the sexual assaults, drugs or alcohol were involved even though they, too, are prohibited under General Order 1A. Be aware that physical contact in public, even when consensual, violates the Uniform Code of Military Justice. You may be charged with indecent exposure and indecent acts.

Respect yourself and respect other wingmen.

The wing's Sexual Assault Prevention and Response Office will continue to focus on education and prevention, but if needed we are always available for help. For more information, send an e-mail to SARC@blab.centaf.af.mil.

Balad Airman receives American Legion Spirit of Service Award

By Senior Airman Kerry Solan-Johnson
332d Air Expeditionary Wing Public Affairs

An award ceremony today in Salt Lake City will recognize an Airman for his dedication to improve his community.

That same Airman will spend his day 7,000 miles away, performing force protection duties here.

Senior Airman Edward J. Slavik, 332d Expeditionary Security Forces Squadron force protection, is the Air Force recipient of the American Legion Spirit of Service Award. The award annually recognizes an outstanding performer from each branch of the armed forces for his or her volunteer off-duty service to the local community.

“Airman Slavik’s record of achievement and selfless contributions are impressive and make him highly deserving of this award,” wrote Maj. Gen. Tony Przybyslawski, Air Force Personnel Center commander, in his note to Gen. Duncan McNabb, Air Mobility Command commander.

In the past year, Airman Slavik volunteered with Habitat for Humanity, the American Red Cross, South Carolina Aquarium, the Charleston County Parks and Recreation and other organizations near Charleston Air Force Base, S.C. He is assigned to the 437th Logistics Readiness squadron fuels flight there.

“(Volunteering) has been a great way to meet people and broaden my horizons,” the St. Clairsville, Ohio native said. “It makes asking ‘what did I do today’ more interesting.”

Though Airman Slavik cannot attend the ceremony, he taped a message to be played when his commander accepts the award for him.

Airman Slavik said he was honored to even be nominated for the award, but he says the award doesn’t comapre to the satisfaction of helping others.
SENIOR AIRMAN ASHLEY GRAHAM

Unit: 332d Expeditionary Medical Group
Air Force Specialty: Cardiopulmonary technician journeyman
Home station: Eglin AFB, Fla.
Family: Husband Senior Airman Isaiah Graham and parents who live in Houston
Years in the Air Force: 4 years
Deployments: 2

Off-duty contribution at Balad: Volunteered more than 30 hours to chapel choir. As a member of the Ventilator Acquired Pneumonia Committee, she provided input on prevention and treatment, and as a patient administration detail member Airman Graham provided security and escorted 61 patients.

On-duty contribution at Balad: Airman Graham manages schedules for staff and 400-plus post-surgical patients and compiles daily intervention statistics to the group commander; she also devised patient treatment log book and improved the flow of the clinic and retooled supply and equipment inventory.

Handling with care

Maj. John Ginnity and Specialist Eric Copeland, 332d Expeditionary Medical Group, transport a wounded Iraqi from a HH-60 Blackhawk helicopter to the Air Force Theater Hospital Aug. 2.
A new patient loading platform will enable patients to be loaded with less difficulty onto high-deck aircraft like the KC-135.

New platform provides patients comfort

To improve safety and comfort for patients being transported on high-deck aircraft, Air Mobility Command officials will acquire several high-deck patient loading platform, or HDPLP, vehicles.

The HDPLP vehicle has a series of hoists that allows the cab and patient seating area of the vehicle to rise to the level of the aircraft’s entrance. This is similar to some ramps and vehicles used at civilian airports that allow people to enter and exit planes without having to climb stairs.

Most aircraft used for aeromedical evacuation, often C-17 Globemaster IIIs and C-130 Hercules, have short, low-angle ramps that allow vehicles and patients to be rolled directly on to the aircraft.

On high-deck aircraft such as the KC-135 Stratotanker, a patient loading system, or PLS, is used. The PLS ramp uses the same angle of elevation as that on the C-9 Nightingale, an aircraft used to transport patients until 2003. However, to reach the entrance of high-deck aircraft, the PLS is much longer and higher than any ramp on C-17s or C-130s.

While the PLS has been effective, the units have been heavily used. Over time, parts have become difficult to maintain and replace due to the system’s highly specialized design.

The concept for HDPLP vehicles was illustrated by a model used at the Special Olympics in Los Angeles several years ago. The proposed vehicle AMC is purchasing is similar in that it meets all requirements of the Americans with Disabilities Act, but would also be configured to transport injured warfighters on NATO litters. The vehicle should accommodate a variety of configurations, holding up to six patients on NATO litters and 10 ambulatory patients.

AFSO21 simplifies uniform development

In January, a limited number of the new Air Force utility uniforms will roll off production lines. Their arrival will mark the end of a nearly five-year development cycle.

Lessons learned from development of the Airman Battle Uniform will be applied to the Air Force’s next uniform project, the “Heritage Coat,” a potential replacement for the current service dress coat.

In the last six months of ABU development, the Air Force began applying principles of Air Force Smart Operations 21 to the uniform development process.

A rapid improvement event found the uniform process was “splintered.”

The improvement team identified four independent processes in the uniform acquisition enterprise that would need individual RIEs. Those areas included requirements and funding, uniform research and development, issue item procurement and optional item procurement. The first of those RIEs, concerning funding and requirements, was held June 26 to 30.

Without defined requirements, what was needed was always changing, said Col. Paul Price of the Air Force Uniform Board. And that uncertainty increases cost and the time it takes to complete a uniform.

Another discovery was the lack of continuity between uniform boards and the data they create.

“We've had uniform boards in the past, but the results of those boards are all kept in file cabinets in notebooks,” said Colonel Price. “So we identified a big need for creating an electronic automated repository for past uniform board decisions.”

COMUSAFE to Russia

The commander of U.S. Air Forces in Europe visited Russia from Aug. 14 to 17 to bolster relationships and security cooperation between U.S. and Russian Air Forces.


“This visit is about cooperation in the global war on terrorism, understanding each other, commonality of tactics, techniques and procedures,” said Brig. Gen. Dan Eagle, defense attaché to Russia. “This visit hopefully will lead to further visits, dialogues and training opportunities.”

Guarding the stallion

Tech. Sgt. John Stott looks out the left side of his MH-53M Pave Low helicopter as it escorts a Marine CH-53 Sea Stallion transporting Secretary of State Condoleezza Rice from Cyprus to the U.S. Embassy in Beirut, Lebanon.

Stories courtesy Air Force Print News

Red Tail Flyer • Page 5 • Aug. 18, 2006
Majority of Iraqi police trained, equipped

BAGHDAD — Iraqi Interior Ministry forces have reached 92-percent of a planned strength of 188,000 troops, the commander of the Coalition's Civilian Police Assistance Training Team said Monday in the capital.


Members of the Iraqi National Police, formerly called special police, are 98-percent trained and equipped, the general said.

The Interior Ministry also controls the Department of Enforcement. Its members are 92-percent trained but only 56-percent equipped, General Peterson said.

The shortfall in equipment, he explained, is a result of resources going to Iraqi forces engaged in offensive operations in Baghdad and other more hotly contested parts of Iraq.

“You can see that they’re doing very well right now,” he said.

The general said 80-percent of instructors at 12 training academies in the country are Iraqis, and said those instructors will run and administer all academies by year’s end.

Of 185 international police trainers, most are contractors from the United States and about 170 military police training teams are helping build the forces’ capabilities, he said.

General Peterson unveiled a new digitized design uniform similar to the U.S. Army’s Advanced Combat Uniform, but with small Iraqi flags embedded into the pattern. The uniforms are to be issued beginning in October to all Iraqi National Police officers.

Insurgent death squads have frequently disguised themselves as Iraqi police to more easily conduct attacks, gaining access to mosques and homes under the premise of official police business.

Officials are working to standardize the uniform and make it distinctive so it can’t easily be copied, he said. The uniforms will be tightly controlled with the goal of national policemen having three sets by year’s end, General Peterson said.

Securing Baghdad no short-term operation

BAGHDAD – The ongoing operation to secure this city of more than 6 million is an evolution and solutions must be long-term, the spokesman for Multi-National Force-Iraq told reporters here Monday.

“Abating the extremists in the capital will neither be easy nor rapid,” Army Maj. Gen. William Caldwell said of progress in Operation Together Forward, a joint Coalition-Iraqi operation to quell sectarian and insurgent violence in the capital.

“Challenges will ensue, but efforts will march forward block by block,” he said.

Know what this is?

If you can identify this object, send an e-mail to 332.redtailflyer@blab.centaf.af.mil. Staff Sgt. Christopher Baskow, 332d Expeditionary Logistics Readiness Squadron, was the first person to correctly identify last week’s picture below, which was the tip of a star barrier.
by Lt. Col. Bob Thompson  
332d Air Expeditionary Wing Public Affairs

During a 24-hour shift that began at 7 a.m. Aug. 7, Air Force Maj. (Dr.) Steve Barnes treated 18 patients with injuries that varied from a crushed foot to multiple improvised explosive device penetrations, as well as gunshot wounds through the thigh and head.

For the surgeon of the day, this meant nine operations, five of which were done on Americans, three on Iraqis and one insurgent.

"I volunteered to come to Balad for both personal and professional reasons," said the trauma surgeon instructor based at Cincinnati's University Hospital in Ohio. "I needed to be here out of a sense of service. I think I am good at what I do and I could help make a difference. As for the professional experience - you don't see wounds like this at home."

The Air Force Theater Hospital here treats about 700 patients a month. About 50 percent are medical admissions and the other 50 percent are trauma cases.

According to hospital records, if a trauma patient arrives at the hospital with a pulse, not dead on arrival, the patient has a 97-percent chance of recovering and moving on to the next stage of care. This is the best rate for trauma patients in military medical history.

"You don't see stuff like this in the states," Major Barnes said. "They don't have IEDs in Cincinnati yet."

The surgeons are equipped to handle any injury just short of doing heart transplant operations. However, the most common trauma injuries they see are from IED blasts.

Located about 42 miles north of Baghdad, the forward-based hospital is the military medical hub for the whole country. Representing nearly every specialty, the surgeons work to stabilize the patients for aeromedical evacuation to Landstuhl Regional Medical Center in Germany. Every six days, they pull an around-the-clock shift as the surgeon of the day.

"We're feeling like big studs right now," said Major Barnes as he operated on an IED victim. "We found pieces of shrapnel and bone in this guy's iliac veins deep in his pelvis, that's the worse place it could be."

Together with vascular surgeon Maj. (Dr.) Cabot Murdock, Major Barnes extracted a piece of shrapnel the size of a quarter from inside a U.S. Soldier.

"He probably would have started bleeding internally on the plane," Major Murdock said. During the five-hour flight to Germany, that kind of internal bleeding would have been fatal, the major said.

With the aid of the hospital's X-ray and imaging capability, the two surgeons found the elusive but deadly metal fragment.

"Trust no one, believe nothing," Major Barnes said. "Pop the hood and look inside for yourself to find out what's going on."

After they vacuum sealed the Soldiers abdomen closed, they explored and irrigated the wounds on his backside and legs.

"We see this here all the time," Major Barnes said. "The IED blast hit him while he was sitting down in his vehicle. See how the blast went up his pelvis and into the abdominal cavity? You don't see this in civilian trauma."

"See that, that's energized pieces of Iraq," Maj Murdock said. "Debris, little rocks. These are in every wound on this guy's body."

Tonight, the pace is steady, Maj Barnes said as the sound of incoming medevac helicopters fills the air. This time the arrival is a single patient, an Iraqi soldier with a gunshot wound in the back of his head. The surgeon holds up to the overhead light an X-ray with the bullet clearly defined just inside the patient's forehead.

"It doesn't take a doctor to tell you that there's something wrong with this picture," he said.

Later, he checks in on fellow surgeon U.S. Army Maj. (Dr.) Hans Bakken, who performs a craniotomy or removal of the skull cap. This is the second brain surgery in less than four hours.

Before his 24-hour shift comes to close at 7:30 a.m., Major Barnes responds to his fifth American patient for the night. Though exhausted, the University of Alabama in Birmingham graduate always tries to give a warm greeting to his patients and to take their mind off of what they're going through.

Surgeon of the day, Maj. (Dr.) Steve Barnes (left) works with vascular surgeon Maj. (Dr.) Cabot Murdock to remove shrapnel from a U.S. Army Soldier at the Air Force Theater Hospital here, Aug. 7.
Hitting a two-meter target with 2,000 pounds of high explosives while traveling hundreds of miles an hour takes sophisticated weapons aboard sophisticated aircraft flown by talented pilots. But, before these munitions can be used they must be inspected, tested, built, loaded and delivered to the aircraft.

That's the job of 81 Airmen assigned to the 332d Expeditionary Maintenance Squadron munitions flight at Balad Air Base, Iraq. "Most people think bombs come out of the box ready to go on the aircraft," said Master Sgt. Robert Franks, noncommissioned officer in charge of precision munitions section deployed from Hill Air Force Base, Utah. "They don't realize the munitions are shipped in as components and need to be built according to the air tasking orders we get from the combined air operations center."

Building smart weapons, munitions that can be delivered to a target through various means, begins with breaking out components from the various storage facilities used by the flight. According to Chief Master Sgt. George Graham, 332d Expeditionary Maintenance Squadron munitions flight chief, the flight keeps its "shelves" stocked with components and places orders for replacement components before on-hand quantities reach critical levels.

"We're like the Iraq branch of a department store chain," said Chief Graham, deployed from Eglin AFB, Fla. "We order our stock from the Southwest Asia distribution center and it is airlifted here. Some of these components have been in the inventory for decades, but they're maintained so well that I wouldn't be surprised to see Vietnam-era components in use today."

According to Senior Master Sgt. William Witherington, there can be anywhere from 10-20 different configurations for one kind of bomb depending on the needs of the warfighter. It takes 5 to 30 minutes to build a munition from scratch.

During the assembly, the fuzes are set, which determine how and when the munitions go off once released by the aircraft. "The fuzes can set off the explosive at various times from release, on impact or even a certain time after impact," said Staff Sgt. Ray Traylor, a munitions Airman deployed from the 188th Fighter Wing, Fort Smith, Ark. "We can set a 2,000-pound bomb to go off after it breaks through a bunker."

When munitions are expended or destroyed because of damage, they are updated in the Air Force database. According to Chief Graham, they can tell when a component was purchased by the Defense Department, when it was installed on a munition and the tail number of the aircraft that used it. The database is updated within an hour after the munition is expended, giving officials important operational data in a timely manner. "When aircraft come back without munitions it really gives me a sense of accomplishment," said Airmen 1st Class Joseph Lewis, deployed from the 188th Fighter Wing, Perrysburg, Ohio, from the 180th Fighter Wing, Perrysburg, Ohio. "Knowing that the pilots used the munitions we made and they worked makes me feel like a key player in the war."

The Airmen of the 332d Expeditionary Maintenance Squadron munitions flight build munitions for both the F-16 Fighting Falcons and MQ-1 Predators assigned to Balad Air Base, Iraq. Below are a few of the most common.

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**AGM-114 Hellfire Air-to-Ground Missile (AGM)**

Primary function: Medium-range, air-to-ground missile

Dimensions: Length 64 inches, diameter 7 inches., wingspan, 1 foot, 1 inch

Speed: 950 mph

Range: up to 5 miles

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**AIM-120A/B/C Advanced Medium Range Air-to-Air Missile (AMRAAM)**

Primary function: Medium-range, air-to-air missile

Dimensions: Length 12 feet., diameter 7 inches, wingspan AIM-120A/B, 1 foot, 9 inch; AIM-120C, 1 foot, 5 inches

Speed: Supersonic

Range: 20+ miles

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**GBU-12 Paveway II**

Primary function: 500-lb. unpowered, laser-guided weapon

Dimensions: Length 10 feet, 9 inches, diameter 11 to 18 inches

Range: More than six miles

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**Joint Direct Attack Munition (JDAM)**

Primary function: GPS/INS smart tailkit that fits on general purpose 500 (GBU-38) and 2,000 (GBU-31) pound unguided bombs

Dimensions: Length from 9 feet, 11 inches (GBU-32) to 12 feet, 8 inches (GBU-31), wingspan from 1 foot, 7 inches (GBU-32) to 2 feet, 1 inches (GBU-31)

Range: Up to 15 miles

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**Mk-82**

Primary function: 500-lb. free-fall, general purpose bomb

Dimensions: Length 5 feet, 6.2 inches, diameter 10.75 inches

Range: Varies by method of employment
Balad docs double surgeries

By Lt. Col. Bob Thompson
332d Air Expeditionary Wing Public Affairs

Air Force Theater Hospital records here indicate that in the past year the number of injured Iraqis is increasing while U.S. casualties are beginning to decrease.

In a strange twist, this means more work for the U.S. Air Force and Army surgeons who performed more than 1,200 surgeries in July, nearly doubling April's tally.

"Today, the ratio of patients is about 60 percent U.S., and 40 percent Iraqis and other nationalities," said Col. George C. Costanzo, 332d Expeditionary Medical Group commander here. "One year ago, the ratio was about 80 percent U.S. and 20 percent from other countries."

These ratios have a direct bearing on the number of surgeries the doctors must perform, the colonel said. For American patients, the goal is to stabilize them and get them on their way out of theater as soon as possible to the next level of higher care.

"American trauma patients usually average only about 25 to 26 and a half hours in Iraq before being shipped back to Germany," said Maj. Cabot Murdock, Air Force vascular surgeon here. "Sometimes it is less than 6 hours."

To stabilize the American trauma patients for movement often requires a couple operations.

However, many Iraqi patients don't have higher medical care available - so they stay at the Air Force Theater Hospital longer, requiring procedures beyond stabilization and follow-up care to prepare them for release.

"An average of about 670 patients a month are admitted through the emergency room," Colonel Costanzo said. "Of that, about 400 are U.S. troops; about 170 are Iraqi soldiers, police and civilians. About 100 are other nationalities including insurgents, unknowns and contractor employees from other countries."

"The insurgents say they do Jihad against the Americans but what they do is kill innocent civilians," said Ali, an Iraqi soldier who asked that his full name not be used. "Ali is a patient in the intensive care ward here being treated for roadside bomb injuries he received near the Syrian border.

Through a interpreter, he said that the care he has received was above his expectations and that the doctors don't differentiate between Iraqis and U.S. troops. All were treated the same.

Another Iraqi patient, Ahmed who also asked that his full name not be used, stated that he had received excellent care too. He was recovering from being shot Aug. 6 by a sniper in Ar Ramadi. He said he was not surprised to get injured because the city is very dangerous.

Also, he wasn't surprised to come to the Air Force Theater Hospital because his cousin had been shot and brought here earlier.

Fighting insurgents and trying to stop violence between religious factions is a difficult challenge because none wear uniforms and all factions target civilians, Iraqi police, Iraqi army and American troops.

However, surgeons at the Air Force Theater Hospital don't worry about those differences and treat all based on medical needs.

"We like to say that political and religious differences stop outside the door," Colonel Costanzo said. "We prioritize patients based on the severity of their injuries so that everyone gets the same quality of treatment no matter who they are."

"It surprised me, but it doesn't bother me to treat detainees," said Capt. (Dr.) Paul DeFlorio, an emergency room doctor deployed from Lackland AFB, Texas. Captain DeFlorio teaches at Wilford Hall Medical Center which is one of the largest military hospitals in the United States. The center handles about 120 trauma cases per month. Here, the hospital averages about 330 trauma cases a month.

"It's one thing to see it written as part of the rules that say you're supposed to, but before I got here, I wasn't sure how I'd feel about it," the captain said about treating insurgents. "I guess your medical instincts kick in to take care of the patient, no matter who he is."

Maj. (Dr.) Cabot Murdock (right) works to repair the blood vessels in the thigh of an insurgent who was wounded Aug. 7. Performing more than 1,200 surgical procedures in July, Major Murdock and his fellow surgeons at the 332nd Expeditionary Medical Group nearly doubled April's tally.
When riding in the back of pickup trucks, Airmen must sit on the truck bed against the side rails or cab. Sitting on the wheel wells, side rails or tailgate is strictly prohibited.

Additional guidelines can be found in LSA Anaconda Regulation 190-5.
With something as small as bottle tops, Staff Sgt. Jessica Martinez hopes to make a difference.

Sergeant Martinez, of the 332nd Expeditionary Logistics Readiness Squadron, has collected the plastic caps from water bottles distributed here and other beverage containers – whatever she’s given – to help out a sixth grade class at her home station, Ramstein Air Base, Germany.

The caps will help purchase a wheelchair for a student in France. The class set a goal of collecting 1 million caps to send to a local recycling company that has agreed to take the caps and use the proceeds to purchase the chair, said Ramstein American Middle School officials.

“I got involved because it was a good cause,” said Sergeant Martinez, who heard about the program through word of mouth. “We’re out here drinking all this water, so it was a great way to help the class out.”

Since May, Sergeant Martinez has collected and sent off more than 120,000 tops to the class, and hopes to pass on her collection efforts to the next rotation.

Sergeant Martinez has expanded the class’ contributors to include Soldiers at Logistics Support Area Anaconda, and other locations in Southwest Asia.

The bottle caps will be turned over to the school in Forbach, France, in the fall.

For more information on worship opportunities or needs, call 443-7703. For the after-hour duty chaplain, call 443-3320.
Snakes on a Plane
Samuel L. Jackson, Nathan Phillips
A ruthless assassin unleashes a crate full of lethal snakes aboard a packed passenger jet over the Pacific Ocean in order to eliminate a witness in protective custody. The rookie pilot and frightened passengers must band together to survive. Rated R (language, sexuality, drug use, terror, violence) 106 min

World Trade Center
Nicolas Cage, Michael Pena
In the aftermath of the World Trade Center disaster, hope is still alive. Refusing to bow down to terrorism, rescuers and family of the victims press forward. Their mission of rescue and recovery is driven by the faith that under each piece of rubble, a co-worker, a friend or a family member may be found. This is the true story of John McLoughlin and William J. Jimeno, the last two survivors extracted from Ground Zero and the rescuers who never gave up. It’s a story of the true heroes of that fateful time in the story of the United States when buildings would fall and heroes would rise, literally from the ashes to inspire the entire human race. Rated PG-13 (intense/emotional content, disturbing images, language) 129 min

The Omen
Seamus Davey-Fitzpatrick, Julia Stiles
Robert Thorn is a senior American diplomat whose wife, Katherine, endures a difficult delivery where their newborn child has died. Thorn knows the news will devastate Katherine, who had suffered two previous miscarriages. The hospital priest presents Thorn with another child born that night, whose mother died in childbirth. The priest compels Thorn to take the infant boy as his own; Katherine will never know the truth, and their son, will be raised as their flesh and blood. Rated R (violence, graphic images, language) 105 min

The Break Up
Vince Vaughn, Jennifer Aniston
Pushed to the breaking-point after their latest, "why can't you do this one little thing for me?" argument, art dealer Brooke calls it quits with her boyfriend, Gary, who hosts bus tours of Chicago. What follows is a series of remedies and underminings suggested by friends, confidantes and the occasional total stranger. When neither ex is willing to move out of the condo they used to share, the only solution is to continue living as hostile roommates until somebody caves. Rated PG-13 (sexual content, nudity, language) 110 min