135

05 ID4 135

Paid
6,500
18 AUG 05

CENTCOM 009989

Pages 2 through 12 redacted for the following reasons:
- -
foreign languge, b(6)

AL AMAL HOSPITAL
ALWIYA – HAY AL WAHDA 902/6/18 BAGHDAD IRAQ
TEL-7170116 7172573

January 12, 2005

MEDICAL REPORT
Re: Mr. (b)(6)

(b)(6) years old was admitted to Amal hospital on the 9th January 2005.

He was involved in gun shooting incident on the 7th January 2005 and had preliminary treatment and was admitted in a stable condition with a chest tube in his right side of the chest.

Injuries:

1- Chest X-ray shows evidence of a localized heamothorax and atelectesis of the right lung.
2- Compound fracture of the right upper arm with loss of 10 cm of the upper part of the humorous and its head. There is complete loss soft tissue, muscle and skin of the anterior and medial aspect of the arm.
3- Amputation of the distal third of the right forearm and the hand.
4- Wounds are clean and were left open.

Management:

1- General measures: His Hb is 9.4 g/dl, ESR 30, White cell count 12800/Gmm, blood sugar 117 mg/dl, and blood urea 34mg/dl. 4 Units of blood is ordered to correct his blood loss.
2- Heavy antibiotics and physiotherapy for the chest
3- Wound excision under general anesthesia.

Discussion of future management:

1- Chest injury most probably will settle down and the chest tube will be removed over the next few days unless atelectasis persists.
2- As for the management of his right upper limb with an amputated right hand and wrist the option of:
   a- disarticulation at the shoulder is a quick and safe procedure but at a very high loss of function and cosmetic disaster.
   b- Bone graft or bone carriage procedure to keep length which is risky, prolonged and costly procedure and the problem of arthrodesis or creating a false joint in the shoulder region should be considered.
   c- Shortening the arm by attaching the muscles of the arm to the muscle of the anterior flab of chest muscles and to the clavicle to create a false joint is an easier procedure at the expense of 10 cm loss of length.
   d- The options of a false joint or arthrodesis of the shoulder will have to be considered.
   e- For the stump of the forearm, a hand prosthesis is an option or creating in the future a pence function by separating the radius and the ulna.

(b)(6) FRCS
Consultant Orthopedic Surgeon.

(b)(6)

Pages 14 through 22 redacted for the following reasons:
- -
(b)(6)
(b)(6), Foreign Language Text
foreign languge, b(6)

Dear Dr. (b)(6)

9.1.2005 Thanks for asking me to see this gun-shot injury of Rt. shoulder & chest. As far as his chest is concerned, he seems to be stable. No surgical emphysema. The lungs are reasonably expanded both radiologically & clinically. He has a localised haemothorax. I think he needs a good antibiotic covering. His chest x-ray has to be repeated after a couple of days and I shall come on tuesday to see him. He is anaemic & needs a couple of pints of blood.

Kind regards Louis

(b)(6), Foreign Language Text

11.1.2005: The new chest x-ray as compared with the one done on the 9th shows evidence of atelectatic Rt. lung. I think he needs vigorous coughing exercises. Otherwise he may develop serious complications due to the collapse & infection. I have given instruction to the nursing staff how to do. His chest x-ray should be repeated after a couple of days in a recumbant position.

Regards.

(b)(6), Foreign Language Text

Foreign Language Text

12.1.2005: x-ray: better than the one done yesterday. The collapsed lung has partially opened up. He has a temperature of 38.5°C. B.P. 110/80. Chest: clinically has wheezes on both sides. The breath sounds are present on the Rt. side. To have: ① Pulse-Temp chart 2 hourly. ② I.V. drip. 3 pints until tomorrow ③ Hydrocortisone

Foreign Language Text

Diagnosis

Foreign Language Text

foreign language

Foreign Language Text, (b)(6)

Bronchoscopy; Surgeon: A. Jarvis

anaesthetist: Dr. Mathi Francis

Adult Negro bronchoscope was introduced.
The Rt. bronchus was full of thick whitish material.
When sucked out, there was yellowish fluid below.
A wire in the bronchus. This was cleared out.

Foreign Language Text, (b)(

Treatment

Foreign Language Text

foreign language

13.1.2004: still febrile & tachpneoic (42/minute). Temp: 38
clinically still has evidence of collapse - consolid
of Rt. Lung. Continue on above treatm. L

(b)(6), Foreign Language Text

foreign language

Page 26 redacted for the following reason:
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foreign languge, b(6)

CENTCOM 010015

Pages 28 through 29 redacted for the following reasons:
- -
(b)(6), Foreign Language Text
foreign languge, b(6)

Pages 31 through 38 redacted for the following reasons:
- -
foreign languge, b(6)

CENTCOM 010027

Pages 40 through 51 redacted for the following reasons:

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foreign languge, b(6)

(b)(6)

(b)(6)

Pages 54 through 74 redacted for the following reasons:
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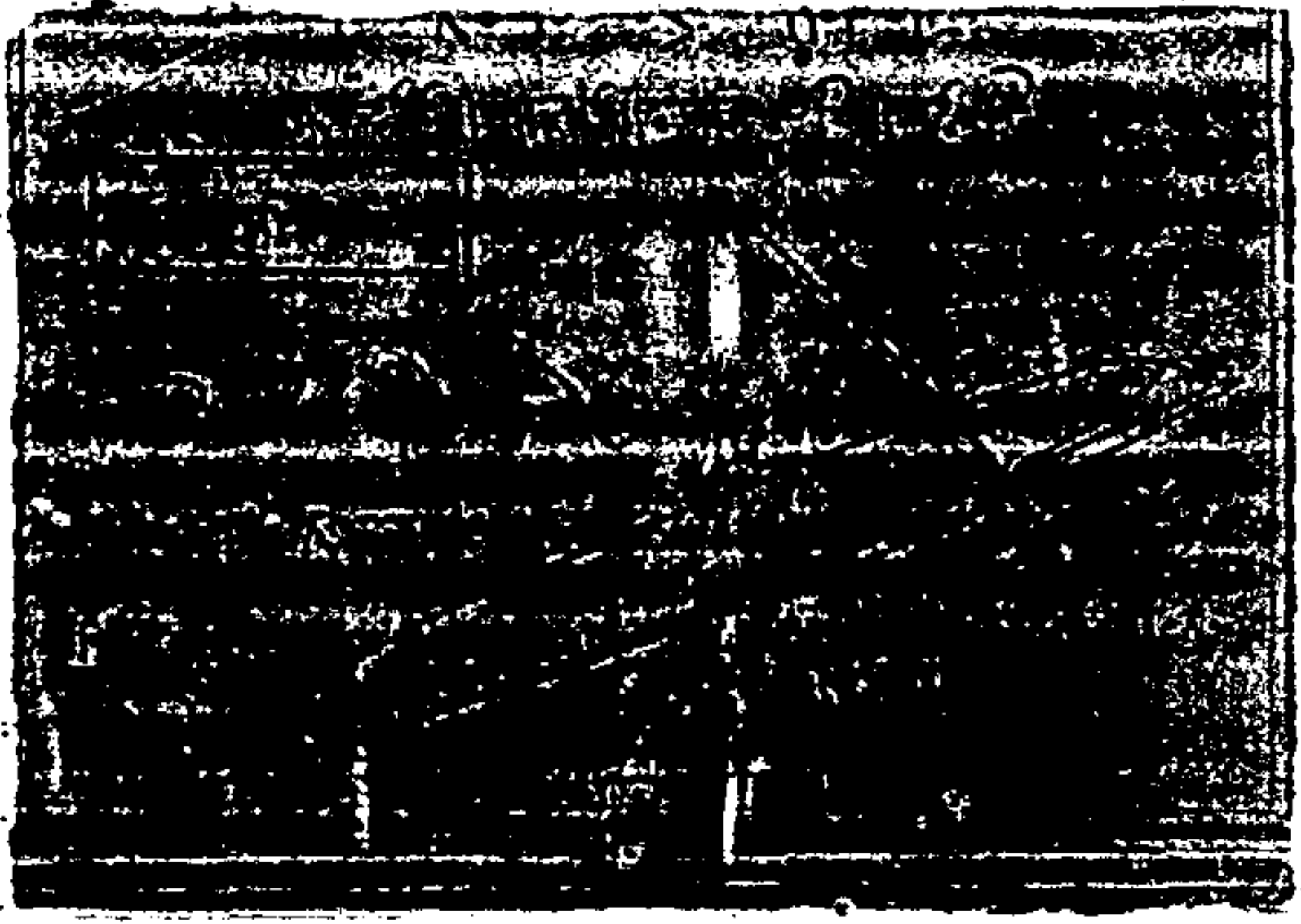
b(6)
foreign languge, b(6)



Standard Form 1034
Revised October 1987
Department of the Treasury
1 TFM 4-2000
1034-121

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

VOUCHER NO.

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION
DEPARTMENT OF THE ARMY
130TH FINANCE BATTALLION
APO AE 09391

DATE VOUCHER PREPARED
15 August 05

SCHEDULE NO.

CONTRACT NUMBER AND DATE

REQUISITION NUMBER AND DATE

PAID BY
3rd SSB
3153rd FIN. DET.
APO AE 09348
DSSN 5579

PAYEE'S NAME AND ADDRESS
(b)(6)
NAYNAWA
AL NAFIRIYA
MOSUL, IRAQ

DATE INVOICE RECEIVED

DISCOUNT TERMS

PAYEE'S ACCOUNT NUMBER

SHIPPED FROM | TO | WEIGHT | GOVERNMENT B/L NUMBER

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUANTITY	UNIT PRICE COST	UNIT PRICE PER	AMOUNT (1)
		FOREIGN CLAIMS NUMBER 05-ID4-135 LOSS OF LIFE/PERS. INJURY/VEH. DAMAGE				6,500.00

(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL 6,500.00

PAYMENT:
- ☐ PROVISIONAL
- ☒ COMPLETE
- ☐ PARTIAL
- ☐ FINAL
- ☐ PROGRESS
- ☐ ADVANCE

APPROVED FOR =$ 6,500.00

EXCHANGE RATE =$1.00

DIFFERENCES

BY: (b)(3)(b)(6)

Amount verified; correct for 6,500.00

TITLE
FOREIGN CLAIMS COMMISSION

(Signature or initials)

Pursuant to authority vested in me, I cer

(b)(3), (b)(6)

15 AUGUST 05
(Date)

FOREIGN CLAIMS COMMISSION
(Title)

ACCOUNTING CLASSIFICATION

ACCOUNT CLASSIFICATION NUMBER (b)(2) High $6,500.00

PAID BY

CHECK NUMBER	ON ACCOUNT OF U.S. TREASURY	CHECK NUMBER	ON (Name of bank)
CASH $ 6,500.00	DATE 18 AUG 05	PAYEE 3 X (b)(3), (b)(6)	

[1] When stated in foreign currency, insert name of currency.
[2] If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title.
[3] When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary," or "Treasurer," as the case may be.

TITLE

Previous edition usable

PRIVACY ACT STATEMENT

NSN 7540-00-800-2234

CENTCOM 010004

DEPARTMENT OF THE ARMY
HEADQUARTERS, 4th BRIGADE "VANGUARD"
3d INFANTRY DIVISION
APO AE 09348

AFVA-4BCT-JA 15 August 2005

MEMORANDUM OF RECOMMENDATION

SUBJECT: Claim #05-ID4-135

1. Claimant's Name/Residence: (b)(6) / Mosul, Iraq

2. Incident giving rise to claim occurred on 7 January 2005, at Check Point 1, Iraq.

3. The claim was filed on 18 May 2005, in the amount of $14,500.00.

4. The claim was considered under the Foreign Claims Act (FCA) and Chapter 10, AR 27-20; claim filed for loss of life, personal injuries, and vehicle damage.

5. Claimant alleges that he, his son, and a cousin, (b)(6), (who was driving), were driving t;owards the Aljumhariya Bridge and prior to reaching Checkpoint 1, there was another temporary checkpoint set up. The U.S. soldiers at that checkpoint redirected their vehicle. After they were redirected, a U.S. convoy approached from the opposite direction in the wrong lane. The convoy opened fire on the vehicle. As a result, Mr. (b)(6) was killed, Mr. (b)(6) and his son were injured, and the vehicle damaged.

6. In order to form a basis for a claim under the FCA, it must be shown that the incident occurred outside the United States, and that it was caused by non-combat activities or negligent or wrongful acts of the United States Armed Forces. The claimant has submitted sufficient evidence.

7. I recommend approving this claim in t

(b)(3), (b)(6)

CPT, JA
Foreign Claims Commission

Claims Form
طلب تظلم

To: United States Army Foreign Claims Commission
الى: موفوضية التظلم لجيش الولايات المتحدة

From; Name:_ (b)(6) _____ من: الأسم:

Address:_ (b)(6) العنوان:___

I am
انا

a. A national citizen of: Iraq أ. أحمل جنسية:

b. A permanent resident of:_____ ب. عنوانى الدائم:

c. Employed by:___ (b)(6) _____ ت: أعمل لدي:

d. Check one ( ) an insurer ( ) Not an insurer

ث: ضع علامة علي أحدهم ( ) أحمل تامين ( ) لا أحمل تامين

e. Check one ( )A subrogee ( ) Not a Subrogee

ج: ضع علامة علي أحدهم ( ) دائن "عليه دين" ( ) ليس دائن "ليس عليه دين" ( )

I hereby make a claim against the United States Government for damages or injuries caused by: (Name, Organization, Military Department, Address, and Telephone Number)

أنني أتظلم لدي حكومى الولايات المتحدة للأضرار والإصابت التى نجمت من:
الأسم
المنظمة
الوحدة العسكرية
العنوان
رقم التليفون

The property damaged is owned by: (If the claim is made as an agent, parent, or guardian, attach a power of attorney or other evidence of authority and fill in the form below for party sustaining the damage or injuries.)

Mr. (b)(6) and his Son (b)(6)

الممتلكات المتضررة مملوكة من: (إذا كان عذا التظلم قدم من قبل ممثل أو قريب أو عائل فالرجاء أحطار المستمسكات التى تخولكم وتوكلكم للتقدم بهذا التظلم ، او أي دليل من ممثلين رسميين.
إملأ التظلم بالأسفل للأفراد المتقدمين بالشكوي للإصابت أو الأضرار التى أصابتهم.)

My claim arose at: Aljumhuriya bridge near checkpoint (1)
(Town) (City) (Country)

البلد أو المحافظة المدينة القرية تظلمى قدم فى:

My claim arose on: Jan 7 2005
Month Day Year

السنة يوم شهر تظلمى قدم فى:

Give a brief statement of the accident or incident on which the claim for damages to property or for personal injury is based, (Use back of this sheet if necessary.)

According to his Speech, his brother and his nafew with the late Mr. (b)(6) were driving thier Car from Checkpoint 2 towards Aljumhuriya bridge and there was a temporary checkpoint in the middle of the Street near checkpoint (1.)

باختصار أشرح ما حدث والأضرار التى أصابتك جراء ذلك ، سواء كانت جسدية أو ممتلكات . (الرجاء أستعمال خلفية هذه الورقة إن لم تكن الأسطر لتكفى)

they told them to go to other way, to the way lead to Iranian Embassy when they start moving a convoy came towards them started ~~shotting~~ shooting and damage the car both of them and the Labe Mr. (b)(6) hurted so much Mr. (b)(6) had injuries in his head and his son in his backbone and shoulders.

Describe nature and extent of property damage or personal injury sustained as a result of the above incident.

Damges of the Car injuries

أشرح متى وطبيعة ما حدث من أضرار سواء كانت جسدية أو لممتلكاتك والتى أصابتك جراء ما حدث بسبب الحادث المقصود .

List in detail the amount of property damage and itemized expenses resulting from the property damage or personal injury; (Attach bills and receipts, if applicable.)

Item	Amount
* Damge in Datsu, vehicle, white (b)(6)	
* Injuries	
Total:	$ 4,500

اشرح بالتفصيل متي تضرر والكلفة للممتلكات أو للإصابات الجسدية وتكلفتها (الرجاء أضافة الثبوتات والممتمسكات والفواتير الضرورية لكل شئ لوحدة)

الشئ المتضرر	تكلفته

إجمالي التكلفة:_____

I was insured to the following extent against the damage or injury I have sustained:

_____

_____

لدي تأمين على الممتلكات أو الضرر الجسدى المتضرر بما يوازي:

_____

_____

The name and address of my insurer (if any) is:

_____

(Name) (Address)

اذا كان لديك أي تأمين الرجاء ذكر أسم وعنوان شركة التأمين:

_____

(العنوان) (الأسم)

I claim as damages: (Indicate amount in U.S. dollars and local currency)

$ 4,500 Local_____

أطالب بتعويض للأضرار يوازي (أكتب بالدولار الأمريكى أو العملة المحلية)

$ العملة المحلية

I (have/ have not) previously filed a claim relating to the incident described above.

سابقا (قمت) (لم أقم) بتقديم بلاغ لهذه الحادثة المذكورة بالأعلى

To the best of my knowledge, another claim (has/ has not) been filed relating to the incident described above.

لحسن علمى طلب تظلم (قدم) (لم يقدم) لهذه الحادثة المذكورة بالأعلى

NOTE: BY SIGNING BELOW, YOU ARE SWEARING THAT THE INFORMATION PROVIDED IN THIS CLAIM IS ACCURATE AND TRUTHFUL. ANYONE WHO ATTEMPTS TO FILE, OR CONSPIRES TO FILE, A DUPLICATE OR FRAUDULENT CLAIM AGAINST THE UNITED STATES GOVERNMENT WILL FACE CRIMINAL PROSECUTION.

ملاحظة: بالتوقيع أسفل هذا التظلم فأن تقسم على أن كل المعلومات المقدمة فى هذا التظلم هى صحيحة وحقيقية . أي شخص يحاول تقديم تظلم كاذب أو مختلق أو يزور التظلم ضدحكومة الولايات لمتحدة الأمريكية سوف يواجه عقوبات جنائية حادة ويحاكم من قبل السلطات .

(b)(6)

(Signature of Claimant)
(توقيع التظلم) الرجاء كتابة الأسم والتوقيع

Subscribed to me this 18 day of May, 2005.

(Signature of Witness)

(Printed Name)

عبنت فى يوم _____ الموافق _____ من عام _____

(توقيع الشاهد)

(إسم الشاهد بالكامل)

Claims Form
طلب تظلم

To: United States Army Foreign Claims Commission
الى: موفوضية التظلم لجيش الولايات المتحدة

From; Name:_ (b)(6) _____ من: الأسم:

Address: العنوان
(b)(6)

I am
أنا

a. A national citizen of: Iraqi أ. احمل جنسية:

b. A permanent resident of: / ب. عنوانى الدائم:

c. Employed by:___ (b)(6) _____ ت: أعمل لدي:

d. Check one ( ) an insurer ( ) Not an insurer

ث: ضع علامة علي أحدهم ( ) احمل تامين ( ) لا احمل تامين

e. Check one ( )A subrogee ( ) Not a Subrogee

ج: ضع علامة علي أحدهم ( ) دائن "عليه دين" ( ) ليس دائن "ليس عليه دين" ( )

I hereby make a claim against the United States Government for damages or injuries caused by: (Name, Organization, Military Department, Address, and Telephone Number)

_____

_____

أنني أتظلم لدي حكومي الولايات المتحدة للأضرار والإصابت التى نجمت من:

الأسم _____

المنظمة _____

الوحدة العسكرية _____

العنوان _____

رقم التليفون _____

The property damaged is owned by: (If the claim is made as an agent, parent, or guardian, attach a power of attorney or other evidence of authority and fill in the form below for party sustaining the damage or injuries.)

The late ((b)(6))

_____

الممتلكات المتضررة مملوكة من: (إذا كان عذا التظلم قدم من قبل ممثل أو قريب أو عائل فالرجاء أحطار المستمسكات التى تخولكم وتوكلكم للتقدم بهذا التظلم ، أو أي دليل من ممثلين رسميين.
إملأ التظلم بالأسفل للأفراد المتقدمين بالشكوي للإصابت أو الأضرار التى أصابتهم.)

_____

_____

My claim arose at: Near Aljumhuriya bridge Checkpoint (1)

(Town) (City) (Country)

_____

البلد أو المحافظة المدينة القرية تظلمى قدم فى:

My claim arose on: Jan. 7 2005

Month Day Year

تظلمى قدم فى: _____

السنة يوم شهر

Give a brief statement of the accident or incident on which the claim for damages to property or for personal injury is based, (Use back of this sheet if necessary.)

According to his speech that the Late Mr. (b)(6)
(his Cousin), he was driving his Car in the way lead to Aljumhariya bridge near checkpoint (1) at 7:00 at evening they found that there was a temprary checkpoint near checkpoint (1) they

بإختصار أشرح ما حدث والأضرار التى أصابتك جراء ذلك ، سواء كانت جسدية أو ممتلكات . (الرجاء أستعمال خلفية هذه الورقة إن لم تكن الأسطر لتكفى)

tell him to go to the way lead to Iranian Embassy at that time a Coalition Convoy was coming from the wrong Side Shoot them then damage the Car bullets Shoot his arm, hand and Shoulder when he reached the hospital they Cut his hand and after that want to Cut his arm from the shoulder but he was dead at that time.

Describe nature and extent of property damage or personal injury sustained as a result of the above incident.

Damages of the Car and Deed of Mr. (b)(6)

أشرح متى وطبيعة ما حدث من أضرار سواء كانت جسدية أو لممتلكاتك والتى أصابتك جراء ما حدث بسبب الحادث المقصود .

List in detail the amount of property damage and itemized expenses resulting from the property damage or personal injury; (Attach bills and receipts, if applicable.)

Item	Amount
Total:	$ 10,000

اشرح بالتفصيل متي تضرر والكلفة للممتلكات أو للإصابات الجسدية وتكلفتها (الرجاء أضافة الثبوتات والممتمسكات والفواتير الضرورية لكل شئ لوحدة)

الشئ المتضرر — تكلفته

إجمالي التكلفة:

I was insured to the following extent against the damage or injury I have sustained:

لدي تأمين على الممتلكات أو الضرر الجسدى المتضرر بما يوازي:

The name and address of my insurer (if any) is:

(Name) (Address)

اذا كان لديك اي تأمين الرجاء ذكر اسم وعنوان شركة التأمين:

(الأسم) (العنوان)

I claim as damages: (Indicate amount in U.S. dollars and local currency)

$ 10,500 Local

اطالب بتعويض للأضرار يوازي (أكتب بالدولار الأمريكى أو العملة المحلية)

$ العملة المحلية

I (have/ have not) previously filed a claim relating to the incident described above.

سابقا (قمت) (لم أقم) بتقديم بلاغ لهذه الحادثة المذكورة بالأعلى

To the best of my knowledge, another claim (has/ has not) been filed relating to the incident described above.

لحسن علمى طلب تظلم (قدم) (لم يقدم) لهذه الحادثة المذكورة بالأعلى

NOTE: BY SIGNING BELOW, YOU ARE SWEARING THAT THE INFORMATION PROVIDED IN THIS CLAIM IS ACCURATE AND TRUTHFUL. ANYONE WHO ATTEMPTS TO FILE, OR CONSPIRES TO FILE, A DUPLICATE OR FRAUDULENT CLAIM AGAINST THE UNITED STATES GOVERNMENT WILL FACE CRIMINAL PROSECUTION.

ملاحظة: بالتوقيع أسفل هذا التظلم فإن تقسم على أن كل المعلومات المقدمة فى هذا اتظلم هى صحيحة وحقيقية . أي شخص يحاول تقديم تظلم كاذب أو مختلق أو يزور التظلم ضدحكومة الولايات لمتحدة الأمريكية سوف يواجه عقوبات جنائية حادة ويحاكم من قبل السلطات .

(b)(6)

_____ _____

(Signature of Claimant)

(توقيع التظلم) الرجاء كتابة الأسم والتوقيع

Subscribed to me this 18 day of May, 2005.

_____

(Signature of Witness)

_____

(Printed Name)

عبنت فى يوم _____ الموافق _____ من عام _____

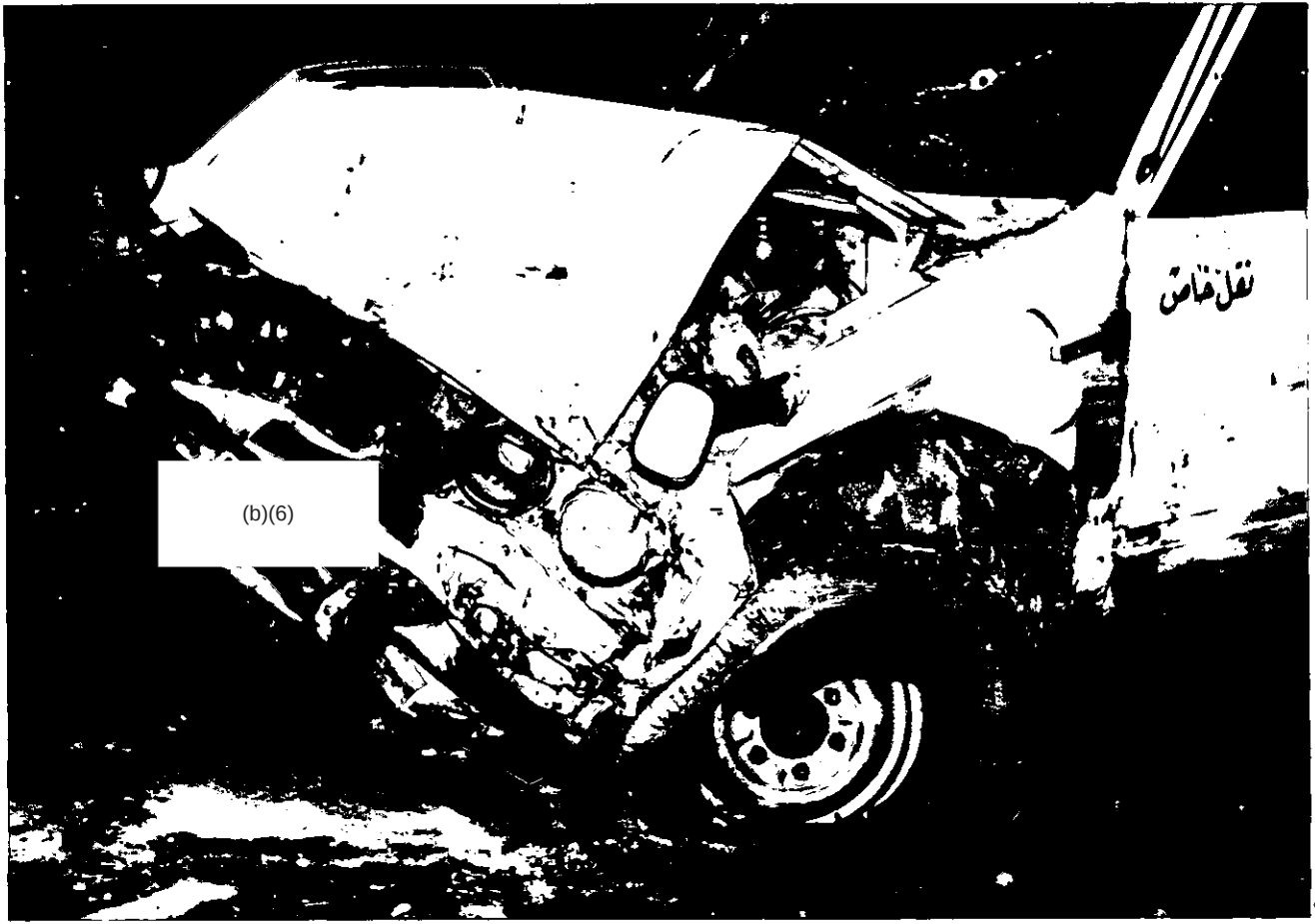
_____

(توقيع الشاهد)

_____

(إسم الشاهد بالكامل)

Page 88 redacted for the following reason:
- -
(b)(6)


نقل خاص
(b)(6)

Pages 90 through 91 redacted for the following reasons:
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(b)(6)