

CENTCOM 002161

06-3-4-522-00001

CLAIM NUMBER: 06-3/4- 522

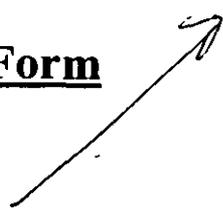
DATE	REMARKS	INITIALS
9 Apr	1-68 is going to pay this guy	
	with CERP funds. CPT (b)(3),(b)(6) is the	SFC (b)(3),(b)(6)
	POC.	

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06-3-4-522-00002

Foreign Claims Intake Form

CONDOLENCE



To: 3D HI, Foreign Claims Office, FOB Warhorse, Iraq.

From: Name (b)(6) (PATERNAL GRANDFATHER) Sex: M
Address (b)(6)

I am a citizen of: IRAQ

Name of U.S. Personnel involved in incident: _____

Owner of property damaged: CLAIMANT

My claim is from: BAQUBAH, IRAQ
Town City Country

My claim is from: FEB 18 2006, AFTER NOON
Month Day Year Time

Give a brief description explaining how the claim arose and the nature of the damages. Be sure to include the what, when, where, and how of what happened. Write legibly.

TAXI SHOT IN EOF. MOTHER KILLED. TWO CHILDREN WOUNDED. DID THE IS-6 FOR THIS ONE. NO NEED TO VERIFY. IT DID HAPPEN. THOUGHT CONDOLENCE WAS ALREADY PAID BUT FAMILY CLAIMS THEY WERE NOT PAID. INVESTIGATE W/ UNIT PPO.

I claim as of (in U.S. dollars and local currency)

\$ 6,500 local _____

(b)(6) _____ (b)(6) _____
Signature Name of Agency

Subscribed on: 1ST day of APRIL, 2006.

(b)(6)

(b)(6)

Signature

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06-3-4-522-00003

Page 4 redacted for the following reason:

(b)(6)

332ND AFTH TRANSFER - D/C SUMMARY
BALAD AB, IRAQ

*Flu either
10th CSHT
332nd EMOB
on 7 MAR 06*

PATIENT NAME: **5710**

AGE: **4**

DATE OF ADMISSION: **18 FEB 06**

332ND AFTH ID / #:

SEX: **M**

DATE OF DISCHARGE: **19 FEB 06**

This patient needs to enter LSA Anaconda and the 332nd AFTH for an appointment on.
Please allow this patient and escort through the front gate.

HPI / MECHANISM & PATTERN OF INJURY:			
<i>Gsw Head. Min depnd skull Rx. (b)(6) 18 FEB 06 For (M) CT Head & stable</i>			
HOSPITAL / OPERATIVE COURSE:			
<i>uncomplicated</i>			
ACTIVE MEDICAL ISSUES:			
<i>none.</i>			
PERTINENT LAB & X-RAY RESULTS		DISCHARGE DX AND CONDITION:	
<i>WNL</i>		<i>Gsw Head & Skull Rx</i>	
DISP & RX:			
Discharge To (Annotate RTD, Indicate if on Profile, D/C Home, Med EVAC to which Civilian or Military Hospital):			
<i>Keffer 160mg/15cc 100cc po qid x 7c #120cc</i>			
MEDICATIONS: <i>(2) Tylenol 160mg/15cc 8cc po q4h prn #120cc.</i> (b)(6)			
SPECIAL INSTRUCTIONS:			
FOLLOW-UP <i>10th CSHT DR. (b)(3),(b)(6) ophtho in 2 wks for</i>			
Pre follow-up / pre-admission studies		<i>staple removed. keep wound dry. Show on Tuesday. PTC if sx of wound</i>	
Outpatient:	DATE:	TIME:	LOCATION:
Admission:	DATE:	TIME:	ADMISSION D)
Check in with PAD for Pre-Admission			INTENDED PROCEDURE: <i>(C)</i>

Foreign Language Text

CONTINUED ON REVERSE SIDE
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Page 6 redacted for the following reason:

(b)(6)

TRANSFER INFORMATION

VENT Yes No

Mode
Tidal Volume
Rate
FiO₂
PEEP
PS

MEDICAL
EQUIPMENT
ACCOMPANYING
PATIENT:

LITTER

AMBULATORY

MEDICAL ATTENDANT Yes

No

NON-MEDICAL
ATTENDANT

Yes

No

RE-EVAL REQUIRED IN EMT

Yes

No

//Signed: (b)(3), (b)(6) (b)(3), (b)(6) MAJ, U.S. ARMY MC, NEUROSUR

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

Physician Signature Block (Typed) (Sign Hard Copy)

Original - Patient (transfer package)
Copy - Inpatient Medical Record
Copy - SGH

CLICK EDIT, CLICK COPY THEN PASTE INTO JPTA

t:/surgeons/JPTA/Transfer-Discharge Summary (Jaso).doc (23 Jul05)

CERTIFICATE OF DEATH (OVERSEAS) Acte de décès (D'Outre-Mer)					
NAME OF DECEASED (Last, First, Middle) Nom du décédé (Nom et prénoms) Unknown (b)(6)		GRADE Grade N/A	BRANCH OF SERVICE Arme N/A	SOCIAL SECURITY NUMBER Numéro de l'Assurance Sociale (b)(6)	
ORGANIZATION Organisation N/A		NATION (e.g., United States) Pays Iraq	DATE OF BIRTH Date de naissance UNK	<input type="checkbox"/> MALE Masculin <input checked="" type="checkbox"/> FEMALE Féminin	
RACE Race		MARITAL STATUS État Civil		RELIGION Culte	
CAUCASOID Caucasique		SINGLE Célibataire		PROTESTANT Protestant	
NEGROID Négróide		MARRIED Marié		CATHOLIC Catholique	
OTHER (Specify) Autre (Spécifier)		WIDOWED Veuf		JEWISH Juif	
NAME OF NEXT OF KIN Nom du plus proche parent			RELATIONSHIP TO DECEASED Parenté du décédé avec le susdit		
STREET ADDRESS Domicile à (Rue)			CITY OF TOWN AND STATE (Include ZIP Code) Ville (Code postal compris)		
MEDICAL STATEMENT Declaration médicale					
CAUSE OF DEATH (Enter only one cause per line) Cause du décès (N'indiquer qu'une cause par ligne)					INTERVAL BETWEEN ONSET AND DEATH Intervalle entre l'attaque et le décès
DISEASE OR CONDITION DIRECTLY LEADING TO DEATH ¹ Maladie ou condition directement responsable de la mort.		PENETRATING THORACO ABDOMINAL - NEURAL INJURY - REFRACTORY SHOCK			UNKNOWN
ANTECEDENT CAUSES	MORBID CONDITION, IF ANY, LEADING TO PRIMARY CAUSE Condition morbide, s'il y a lieu, menant à la cause primaire				
Symptômes précurseurs de la mort.	UNDERLYING CAUSE, IF ANY, GIVING RISE TO PRIMARY CAUSE Raison fondamentale, s'il y a lieu, ayant suscité la cause primaire				
OTHER SIGNIFICANT CONDITIONS ² Autres conditions significatives ²		NONE			
MODE OF DEATH Condition de décès	AUTOPSY PERFORMED Autopsie effectuée <input type="checkbox"/> YES Oui <input type="checkbox"/> NO Non	CIRCUMSTANCES SURROUNDING DEATH DUE TO EXTERNAL CAUSES Circonstances de la mort suscitées par des causes extérieures			
NATURAL Mort naturelle	MAJOR FINDINGS OF AUTOPSY Conclusions principales de l'autopsie				
ACCIDENT Mort accidentelle					
SUICIDE Suicide	NAME OF PATHOLOGIST Nom du pathologiste				
HOMICIDE Homicide	SIGNATURE Signature	DATE Date	AVIATION ACCIDENT Accident à Avion <input type="checkbox"/> YES Oui <input type="checkbox"/> NO Non		
DATE OF DEATH (Hour, day, month, year) Date de décès (l'heure, le jour, le mois, l'année) 18 FEBRUARY 06 / 1900		PLACE OF DEATH Lieu de décès BALAD AB, IRAQ			
I HAVE VIEWED THE REMAINS OF THE DECEASED AND DEATH OCCURRED AT THE TIME INDICATED AND FROM THE CAUSES AS STATED ABOVE. J'ai examiné les restes mortels du défunt et je conclus que le décès est survenu à l'heure indiquée et à, la suite des causes énumérées ci dessus					
NAME OF MEDICAL OFFICER Nom du médecin militaire ou du médecin sanitaire (b)(3),(b)(6)			TITLE OR DEGREE Titre ou diplôme M.D.		
GRADE Grade LT COL		INSTALLATION OR ADDRESS Installation ou adresse 332 EMDG BALAD AE			
DATE Date 18 FEBRUARY 06		SIGNATURE Signature (b)(3),(b)(6)			
¹ State disease, injury or complication which caused death, but not mode of dying such as heart fail ² State conditions contributing to the death, but not related to the disease or condition causing death ¹ Préciser la nature de la maladie, de la blessure ou de la complication qui a contribué à la mort, m ² Préciser la condition qui a contribué à la mort, mais n'ayant aucun rapport avec la maladie ou à la condition qui a provoqué la mort.					

HOSPITAL REPORT OF DEATH <small>FOR USE OF THIS FORM, SEE AR 40400. THE PROPOSING AGENCY IS OFFICE OF THE SURGEON GENERAL.</small>		NAME AND LOCATION OF HOSPITAL 332 EMDG BALAD AB, IRAQ			
<i>Instructions - Medical Officer in attendance will: Prepare, in one copy only, Items 1 through 10 and sign Item 11. Print or type entries.</i>		<i>Send form, without delay to the Registrar or Administrative Officer of the Day, for necessary action and for preparation of required number of copies.</i>			
SECTION A - ATTENDING MEDICAL OFFICER'S REPORT					
PERSONAL DATA					
1. PATIENT DATA (Patient's ward plate will be used to imprint identifying data if available) 18 Feb 66 UNK (b)(3),(b)(6) (b)(6)	2. TIME OF DEATH (Hour-day-month-year) 18 Feb 66 @ 1900	3. MEDICAL EXAMINER/ CORONER'S CASE <input type="checkbox"/> YES <input type="checkbox"/> NO	5. CHAPLAIN NOTIFIED <input type="checkbox"/> YES <input type="checkbox"/> NO		
4. RELIGION 6. NAME, ADDRESS AND RELATIONSHIP OF RELATIVE OR FRIEND PRESENT AT DEATH		6. NAME, ADDRESS AND RELATIONSHIP OF RELATIVE OR FRIEND PRESENT AT DEATH			
Patient's name (Last, first, middle initial) Grade, Social Security Account No., Register Number and Ward Number					
CAUSE OF DEATH			APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH		
7a. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH (This does not mean the mode of dying, e.g., heart failure, asphyxia, etc. It means the disease, injury, or complication which caused death)	DUE TO (or as a consequence of) PENETRATING THORACIC ABDOMINAL-MULCAL INJURY, REPAIR BY SURG		UNKNOWN		
7b. ANTECEDENT CAUSES (Morbid conditions, if any, giving rise to the above cause, stating the underlying condition last)	DUE TO (or as a consequence of) (1) (2)				
8. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH, BUT NOT RELATED TO THE DISEASE OR CONDITION CAUSING IT	a. b.	2			
9. DATE 18 FEBRUARY 66	10. TYPED OR PRINTED NAME AND GRADE OF MEDICAL OFFICER IN ATTENDANCE (b)(3),(b)(6) KC USAFMCES	11. SIGNATURE OF (b)(3),(b)(6)	ATTENDANCE		
SECTION B - ADMINISTRATIVE ACTION					
TYPE OF ACTION	HOUR	DAY	MONTH	YEAR	INITIALS OF RESPONSIBLE OFFICER
12. TELEGRAM TO NEXT OF KIN OR OTHER AUTHORIZED PERSON					
13. POST ADJUTANT GENERAL NOTIFIED					
14. IMMEDIATE CO OF DECEASED NOTIFIED					
15. INFORMATION OFFICE NOTIFIED					
16. POST MORTUARY OFFICER NOTIFIED					
17. RED CROSS NOTIFIED					
18. OTHER (Specify)					
19.					
SECTION C - RECORD OF AUTOPSY					
20. AUTOPSY PERFORMED (If yes, give date and place) <input type="checkbox"/> YES <input type="checkbox"/> NO			21. AUTOPSY ORDERED BY (Signature)		
22. PROVISIONAL PATHOLOGICAL FINDINGS					
23. DATE	24. TYPED NAME AND GRADE OF PHYSICIAN PERFORMING AUTOPSY		25. SIGNATURE OF PHYSICIAN PERFORMING AUTOPSY		
26. DATE	27. TYPED NAME AND GRADE OF REGISTRAR		28. SIGNATURE OF REGISTRAR		

UNST



TF 30TH MED BDE CCIR REPORT

DIRECT REPORTING UNIT: 332 AEW / EMDG / MCC

CCIR REPORTING UNIT:

DATE AND TIME OF INCIDENT: 18 Feb 06 @

TYPE OF INCIDENT: Death

LOCATION OF INCIDENT: BAquba

PERSONNEL INVOLVED:

18 Feb 06 (b)(3),(b)(6)
NAME: ~~Unknown~~ (b)(6)
ID NUMBER: (b)(6)
NATIONALITY: Iraqi

SUBJECT:

REMARKS: Pt was shot after running a checkpoint

PUBLICITY:

POC NAME: NUMBER: (b)(2)High

FFIR #

PIR #
N/A

In the name of God

Sir, Baqubah investigation judge , Esquire

Subject / complaint

In date 18 / 2 / 2006 the deceased victim (b)(6) was with her children coming from Jalawla district heading to Baqubah city by a taxi car Ford – Golden color . and when they arrived to the beginning of the city near Saif Saad area , there were several US vehicles stopped on the road , the driver of the taxi car lowed the speed in order to stop his car on the checkpoint but the troops of the US army opened fire heavily towards the car and killed my nephew and the wife of my son ((b)(6)), (b)(6) (b)(6) and her children injured largely and then the US troops transported them by the plane to Balad ministry hospital and gave us a death certificate . so I demand the complaint and compensation against the coalition forces .

The complainant

(b)(6)

19 / 2 / 2006

Baqubah investigation court
20 / 2 / 2006

the evidence of the complainant (b)(6) , born in 1940 , his work is a farmer , he lives at Al-Khaliss , he evidences as the following :-

In date 18 / 2 / 2006 at 2-4 P.M. the victim (b)(6) who is my nephew and the wife of my son with her little children coming from Jalawla district heading to Baqubah city by a taxi car Ford – model (b)(6) - Golden color . and when they arrived to the beginning of the city near Saif Saad area , there were several US vehicles stopped on the road near the Iraqi police checkpoint, the driver of the taxi car lowed the speed in order to stop his car on the checkpoint but the troops of the US army opened fire heavily towards the car without any reason and killed my nephew and the wife of my son ((b)(6)), (b)(6) and her children injured largely and then the US troops transported them by the plane to Balad ministry hospital and gave us a death certificate to the victim (b)(6) (b)(6) . so I demand the compensation about the death of the victim and the injury of the small children and I have witnesses about the accident . and this is my evidence .

the complainant

(b)(6)

The judge

Baqubah investigation court
22 / 2 / 2006

the evidence of the witness (b)(6) , born in 1975 , his work is a farmer , he lives at Al-Khaliss , he evidences as the following :-

In date 18 / 2 / 2006 afternoon , I and my wife the victim (b)(6) (b)(6) who is my cousin and my little children coming from Jalawla district heading to Baqubah city by a taxi car Ford – model 1995- Golden color . and when we arrived to the beginning of the city near Saif Saad area , there were several US vehicles stopped on the road near the Iraqi police checkpoint, the driver of the taxi car lowed the speed in order to stop his car on the checkpoint but the troops of the US army opened fire heavily towards the car without any reason and killed my wife ((b)(6)) , and my children injured largely and I injured too and then the US troops transported me and my children by the plane to Balad ministry hospital in order to cure us . and I permit my father to make a complaint against the coalition forces and to make a claim in order to get compensation . and this is my evidence .

the witness
(b)(6)

The judge

**Baqubah investigation court
22 / 2 / 2006**

**the evidence of the witness (b)(6) , born in 1960
, his work is a taxi driver , he lives at Baqubah city , he evidences as
the following :-**

**In date 18 / 2 / 2006 afternoon , I was driving my car Kia – Bus
heading to Baqubah taking the road near Saif Saad area and before
entering Baqubah city there were several Iraqi cars driving with
normal speed and the car Ford – Golden color was within these cars
where a family was inside it and on the road we watched the US forces
stopped on the way and all the Iraqi cars lowed the speed on the road
near the Iraqi police checkpoint, the driver of the taxi car lowed the
speed in order to stop his car on the checkpoint but the troops of the
US army opened fire heavily towards the car without any reason and
killed a woman and her husband and children injured largely and
then the US troops transported them by the plane to Balad ministry
hospital in order to cure them and this accident was because of a
wrong doing by the US troops , and this is my evidence .**

the witness

(b)(6)

The judge

CENTCOM 002175

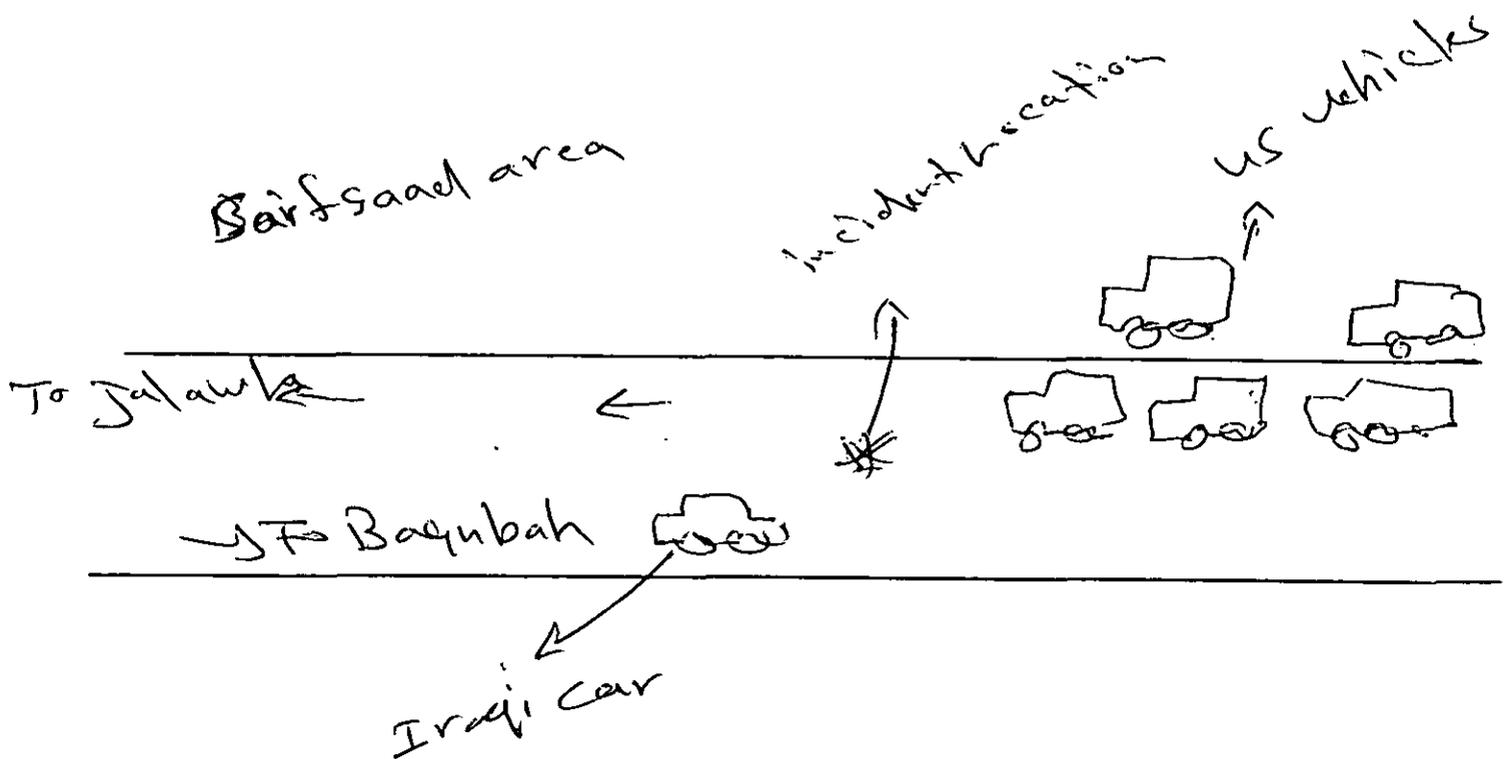
06-3-4-522-00015

Baqubah investigation court
20 / 2 / 2006

the statement and the charter for the incident

1. the incident location is about 4 K.M. far from our station .
2. the incident is that the US forces shot fire on the Iraqi car Ford .
3. the result of the incident is the death of a woman and injured her children and her husband .
4. the location of the incident is near Saif Saad area .
5. I did not watch anything else benefit from it in the investigation .

The charter



Investigation officer