

SAF INJ/DAM

- Approve \$5,000 -

19-1
80-1005-08
08-7455
(b)(6)



REPLY TO
ATTENTION OF:

DEPARTMENT OF THE ARMY

Headquarters, 3d Brigade Combat Team

101st Airborne Division (Air Assault)

Camp Striker, Iraq, APO AE 09322

AFZB-KC-JA

04-May-08

MEMORANDUM FOR RECORD

SUBJECT: Action on Claim of (b)(6)
08-IK5-T455 / 19-1

1. Facts.

The claimant alleges that while her husband was driving his vehicle in front of a CF base, CF opened fire and shot him in the head, killing him.

Claimant has requested \$5,000.00

2. Opinion. 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 noncombatant activities of the United States Armed Forces or by the negligent or wrongful acts of military members or civilian employees of the Armed Forces. The claim packet contained credible evidence of damage caused by US forces not involved in combat operations.

3. Authority. The Foreign Claims Act (10 U.S.C. § 2734) as implemented by AR 27-20, Chapter 10.

4. Action. Settle this claim in the amount of \$5,000.00

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

CPT, JA
Claim Attorney IK5

Closed out
on tractor -
Claimant
has not been
paid



REPLY TO
ATTENTION OF:

DEPARTMENT OF THE ARMY

Headquarters, 3d Brigade Combat Team

101st Airborne Division (AASLT)

Camp Striker, Iraq, APO-AE 09322

04-May-08

Foreign Claims Commission IK5

RE: Claim # 08-IK5-T455 / 19-1

(b)(6)

Taji

Dear Claimant:

You have submitted a claim seeking compensation for the damage to your personal property. I have thoroughly reviewed your claim pursuant to the Foreign Claims Act (FCA), Title 10, United States Code §2734, Army Regulation 27-20, and Department of the Army Pamphlet 27-162 Claims Procedures.

Allow me to express my sympathy for the damage to your personal property. In accordance with the cited references and the investigation into your claim, I find that your claim is compensable. Accordingly, the 3rd Infantry Division Claims Office will compensate you for your losses in the amount of \$5,000.00

If you are dissatisfied by this action, you may request reconsideration of the decision in accordance with AR 27-20. Any such request must be based on new or additional evidence and should be forwarded to this office. While there is no prescribed format for such a request, it must describe the legal and/or factual basis for relief. Any request for reconsideration should be made in writing within 30 days of your receipt of this letter. Thank you for your kind attention.

Sincerely,

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

Captain, US Army
Claims Attorney IK5

CENTCOM 016888

08-IK5-T455-00003

<small>Standard Form 1034 (20)</small> <small>Revised October 1987</small> <small>Department of the Treasury</small> <small>T. FPMR 41-2005</small> <small>1034-121</small>		PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL			VOUCHER NO.	
U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE ARMY 24th FMC Camp Liberty, Iraq APO-AE 09344 DSSN: 5579		10 DATE VOUCHER PREPARED 04-May-08		SCHEDULE NO.		
		CONTRACT NUMBER AND DATE		PAID BY 24th FMC Camp Liberty, Iraq APO AE 09344 DSSN: 5579		
		REQUISITION NUMBER AND DATE				
PAYEE'S NAME AND ADDRESS CLAIM #: 08-1K5-T455 (b)(6) Taji				DATE INVOICE RECEIVED		
				DISCOUNT TERMS		
				PAYEE'S ACCOUNT NUMBER		
SHIPPED FROM		TO		GOVERNMENT BAL. NUMBER		
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <small>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</small>	QUAN-TITY	UNIT PRICE		AMOUNT
				COST	PER	
		In full settlement of the amount allowed by the Secretary of the Army, or an officer duly designated for such purposes under authority of 31 U.S.C. 3721 and AR 27-20, Chapter 10, upon the claim of the above named claimant for property damaged, lost, destroyed, captured, or abandoned in service.				\$5,000.00
(Use continuation sheet(s) if necessary) (Payee must NOT use the space below)						TOTAL \$5,000.00
PAYMENT: <input type="checkbox"/> PROVISIONAL <input checked="" type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE		APPROVED FOR (b)(3), (b)(6) TITLE: CPT, US Pay ^		EXCHANGE RATE = \$1.00		DIFFERENCES Amount verified, correct for (Signature or initials)
Pursuant to authority vested in me, I certify (Date)		(b)(3), (b)(6)		Foreign Claims Commission IK5 (Title)		
ACCOUNTING CLASSIFICATION						
		(b)(2)High		\$5,000.00		
PAID BY	CHECK NUMBER	ON ACCOUNT OF U.S. TREASURY	CHECK NUMBER	ON (Name of bank)		
	CASH	DATE	PAYEE			
	\$5,000.00		(b)(6)			
<small>When stated in foreign currency, insert name of currency.</small> <small>If the ability to certify and authority to approve are combined in one person, one signature only is necessary, otherwise two approving officers will sign in the space provided, over his official title.</small> <small>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.</small>			PER TITLE			

PRIVACY ACT STATEMENT

The information requested on this form is required under the provisions of 31 U.S.C. 82b and 82c, for the purpose of disbursing Federal money. The information requested is to identify the particular creditor and the amounts to be paid. Failure to furnish this information will hinder discharge of the payment obligation.

Claim Department

"THE CLAIM'S CONTAINS"

Case no; (b)(6)

The Claimant name:- (b)(6)

- Death of certification.....
- Investigation reports from Iraqi police station.....
- 2 Sworn statements.....
- Personal documents.....
-
-



Foreign Language Text

SIGN; (b)(6)

NAME;

Date:- 14-Jan-08



Claims Form



To: United States Army Foreign Claims Commission

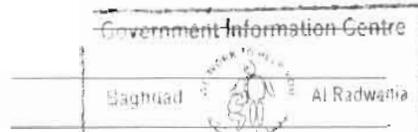
From: Name: (b)(6)

Address: (b)(6)

Iraqi ID N

I am

- a. A citizen and national of: _____
- b. A permanent resident of: Iraq
- c. Employed by: (b)(6) Baghdad - Iraq
- d. Check one () an insurer (X) NOT an insurer
- e. Check one (X) A subrogee () Not a subrogee



Foreign Language Text

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

Against M.N.F

The property damaged had owned by: (If the claim is made as an agent, parent, or guardian, attach a power of attorney or other evidence below for party sustaining the damage or injuries.) (b)(6)

My claim arose at Sheik Amer area Baghdad Iraq
(Town) (City) (Country)

My claim arose on APR 14 2007
(Month) (Day) (Year)

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.)

On date 14-APR-07 my husband was driving his
Car type (TOYOTA) crown model (b)(6) white color plate
No. (b)(6) on the road front of U.S base in
Sheik Amer area. the U.S army opened fire on my
Husband. which led to injured him in the head
And died. So am asking for a compensation.

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

Killed my husband by the U.S army

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
1- About value the victim	\$ 5000/100
2-	
3-	
4-	
5-	
6-	

Total: \$ 5000/100

I was insured to the following extent against the damager or injuries I have sustained:

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

(Name)

(Address)

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

\$ 5000/100 local 6,250/1000 I.D

(b)(6)

(Signature of Claimant)

Subscribed before me this 14 day of Jan, 2008.



(b)(6)

(SIGNATURE)

(b)(6)

(PRINT NAME)

CENTCOM 016892

claim for the claimant

Name: (b)(6)

address - Baghdad - (b)(6)

I.D. No. (b)(6) Iraqi residence

Baghdad Iraq home wife
against the M.N.F.

The claimant (b)(6)

The claim occurred in Sheikh Awwar area
city of Baghdad - Iraq.

my claim on 04-14-2007

On the date of 04-14-2007 while
my husband driving his vehicle type
Toyota crown Model (b)(6) white in
colour plate No. (b)(6) Anbar on the
road in front of the American base
of Sheikh Awwar during wedding
ceremony. The American forces opened
the fire on my husband which led
to be injured at the head and death.
So I am asking for compensation.

I am asking for \$5000.00 for the
killed person

sig. & stamp

Date: 01-14-2008

Pages 9 through 10 redacted for the following reasons:

FOREIGN LANGUAGE DOCUMENT
FOREIGN LANGUAGE DOCUMENT, (b)(6)

claimant Name:-
complete address:-

(b)(6)

(b)(6)

Detail of the accident:- On the date of 04.14.2007
while my husband driving his car type Toyota
woman white in colour Model plate No

(b)(6)

(b)(6)

on the road in front of
The American base in the area in a wedding
ceremony, The U.S. forces opened fire in the
direction of my husband vehicle and that
led to be killed by the fire bullet on his
head and chest. I am asking compensation
of \$ 5000.00

Signature
and stamp 01.13.07

(b)(6)

(b)(6)

(b)(6)

The signature her is her
the aunt of the claimant

Page 12 redacted for the following reason:

FOREIGN LANGUAGE DOCUMENT, (b)(6)

AL Karma Police office

Date: 12-11-2007

Testimony of the witness:

(b)(6)

B.D.

(b)(6)

(b)(6)

work in the
line in

(b)(6)

(b)(6)

The testimony as follows. That on the date of 04.14.2007
The U.S. Forces opened fire randomly
on (b)(6) and this my testimony
sig. of Major

Testimony of the witness

(b)(6)

(b)(6)

B. date

(b)(6)

his job

is to one of the members of

(b)(6)

(b)(6)

line in

(b)(6)

he testify as follows.

That on the date of 04.14.2007 that
The U.S. Forces opened fire randomly
and killed (b)(6) 9. that's my
testimony sig. of Mjr.

CENTCOM 016898

08-1K5-T455-00013

Page 14 redacted for the following reason:

FOREIGN LANGUAGE DOCUMENT, (b)(6)

Karma Police office :- 11-29-2007

The testimony of ~~tham~~

(b)(6)

(b)(6)

Birth date

(b)(6)

live in

(b)(6)

he claim as the following:-

On the date of 04-14-2007 The U.S. Force

killed my brother who called

(b)(6)

(b)(6)

, and that in the area called HUBOSADA

when it happened of opening fire

by the american side only by

snipers, and my father killed at

the time, and I fix the claim

and ask compensation from the U.S.

force and that's all.

sig. of

investigation officer

CENTCOM 0169

(b)(6)

00015

(b)(6)

AL-Karma Investigation court

date: 11-29-2007

The testimony of the claimant

(b)(6)

(b)(6)

born at

(b)(6)

line in

in

(b)(6)

The village of

(b)(6)

he testify after he shows his I.D. by the
judge on the date 04.14.2007 the U.S.F
opened fire randomly near its base
in the area of Abbasoda which led to
the injury of my brother who called
at the time, he asking compensation
from the M.N.F.

(b)(6)

which it killed

sig.

Judge

The claimant sig.

(b)(6)

(b)(6)

Page 17 redacted for the following reason:

FOREIGN LANGUAGE DOCUMENT, (b)(6)

claimant of Mr. [REDACTED]

(b)(6)

to :- to Karma investigating judge

Date :- 11-25-2007

On the date of 04-14-2007 the
U.S. Forces killed my brother who called

(b)(6)

by a

(b)(2)High

so he died at the time. I ask for
compensation, also arise claim.

claimant

(b)(6)

11-25-2007

To the investigation office :-

To make complete investigation and
let me know.

sig. The judge

(b)(6)

11-25-2007

CENTCOM 016903

08-1K5-T455-00018

FOREIGN LANGUAGE DOCUMENT

FOREIGN LANGUAGE DOCUMENT, (b)(6)

FOREIGN LANGUAGE DOCUMENT, (b)(6)

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

Accepted

Al Karma Police office

Date: 12-11-2007

To the investigating judge of Al-Karma,
Your decision:

- 1- I wrote down the claimant of the personal right and the witnesses, here by to write down their testimony waiting for your decision please. (b)(6)
2. We completed the investigating and the diagram for the place of accident for your knowledge please, with respect
sig. of the
maj. (b)(6) officer.

1) we assured the whole testimony of the personal claimant and attach to the documents

2) we assured all the testimonies of the witnesses Mr. (b)(6) and the witness (b)(6) (b)(6) legally.

3) I looked over the investigating report of the place of accident

4- continuing of the investigation

5- the give it to the knowledge of the general public prosecutor.

sig of the judge

(b)(6)

Date 12. 11. 2007

Page 21 redacted for the following reason:

FOREIGN LANGUAGE DOCUMENT, (b)(6)

Foreign Language Text

Illegible

Foreign Language Text, (b)(6)

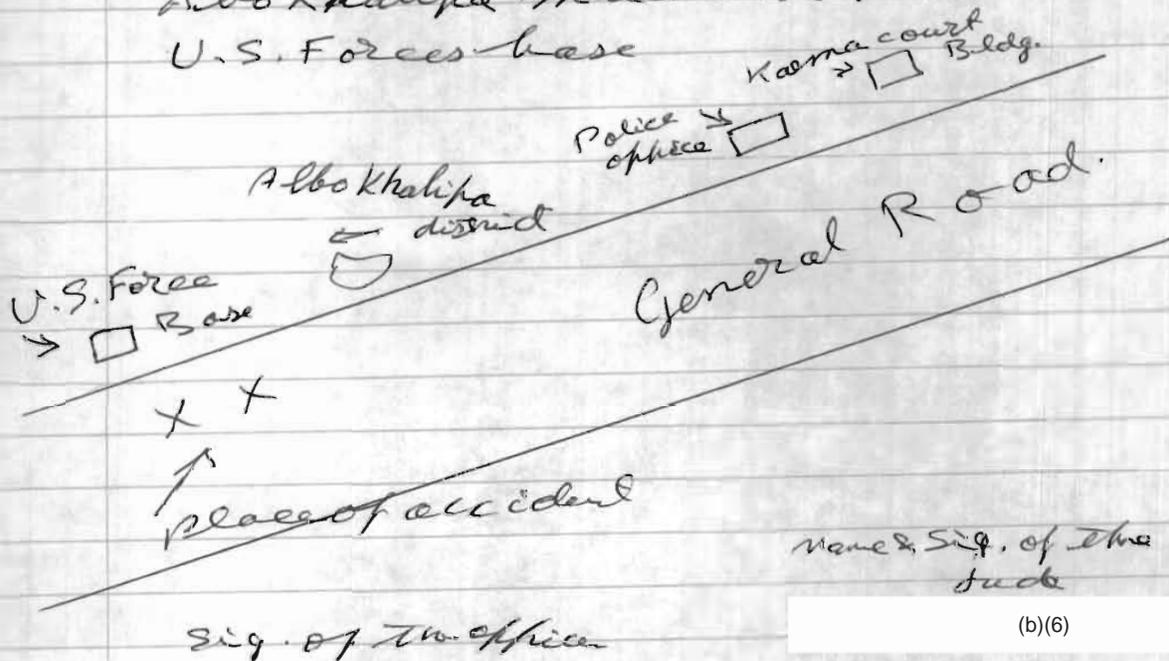
Foreign Language Text, (b)(6)

Karma Police office

Date: 12-11-2007

investigation record on the accident of the
Killing of Mr. (b)(6)

- 1) place of accident is away from our office by 7 kilometer.
- 2) The accident occurred in district of Albo Khalifa in a house was used as U.S. Forces base



Al-Karma Police office:

Date: 11-29-2007

TO The investigating judge of AlKarma
Your decision

I took and fix down the claim of
the claimant (b)(6), ⁱⁿ

indoned here which is for complain and
compensation from the U.S. Forces for
the killing of his brother (b)(6)

to take his testimony legaly, with respect

sig.
The officer

CENTCOM 016909

08-1K5-T455-00024

Page 25 redacted for the following reason:

FOREIGN LANGUAGE DOCUMENT, (b)(6)

AL-Karma Police office

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

Date: - 12-09-2007

repeated

The claim of Personal right

(b)(6)

(b)(6)

B.D.

(b)(6)

live in

(b)(6)

On the date of 04.14.2007 the U.S. Forces opened fire randomly and according to exchange fire with unknown armed people and as a result my son

(b)(6)

(b)(6)

had been killed, I am asking compensation against the U.S. Forces and this is my claim

Sign of

Sign

the investigator office of claimant

(b)(6)

To the investigating & court

date: - 12-09-2007

The claimant who ~~is~~ ~~is~~ ~~is~~ the personal rights

(b)(6)

, and I read for her the testimony she did under swear, so I agree on it.

Sign of judge

Date 12.11.2007

Page 27 redacted for the following reason:

FOREIGN LANGUAGE DOCUMENT, (b)(6)

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its accopy.

Karna Police office
Testimony of

(b)(6)

Page 29 redacted for the following reason:

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AL-Kaima Police Officer

is completely repeated as before and it a copy
testimony

(b)(6)

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FOREIGN LANGUAGE DOCUMENT, (b)(6)

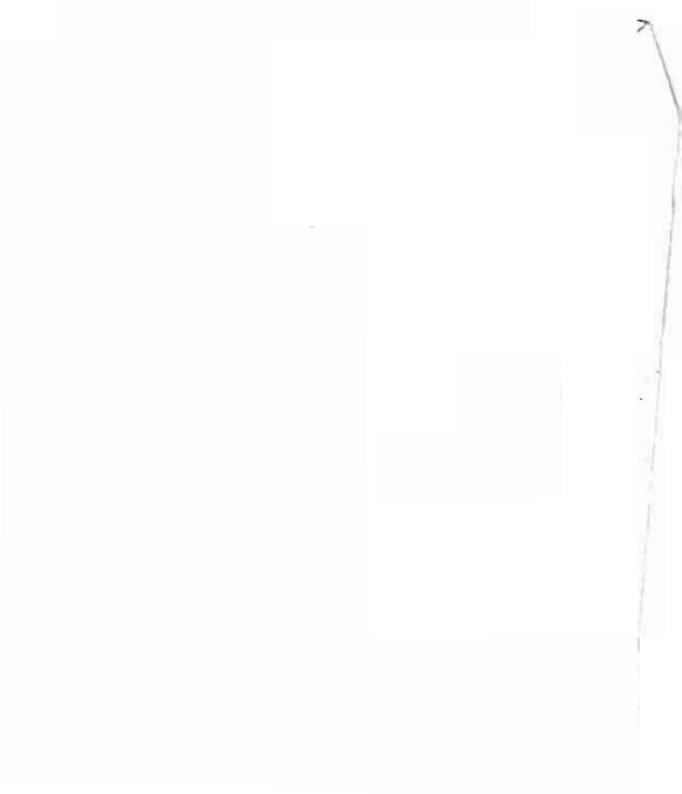
CENTCOM 016917

08-IK5-T455-00032

FOREIGN LANGUAGE DOCUMENT, (b)(6)

CENTCOM 016918

08-IK5-T455-00033



FOREIGN LANGUAGE DOCUMENT, (b)(6)



GIC OPINION ABOUT CLAIMS

(b)(6)

Case no.19-1

1. The claimant presented certificate of death no; (b)(6) from ministry of health confirmed that the US army responsible for killed the claimant's husband because they opened fire onto the victim head on 14.APR.07
2. The claimant presented two sworn statement (b)(6) confirmed that the US army opened fire on her husband in the head and chest which led to died During the claimant's husband driving his car in wedding procession near by the American base in SHEIK AMER area.
3. The claimant asks amount of \$5000.00.
4. We suggest compensate her as she asks.

With our respect,

(b)(6)

The lawyer.

(b)(6)

14 January 08

Government Information Centre

Radweria

(b)(6), Foreign Language Text

in Language

GIC MANAGER.

(b)(6)

15 - Jan - 2008

Foreign Language Text, (b)(6)

Qraq Republic Ministry of Health

Death certificate no. 111

(b)(6)

(b)(6)

Name:-

Sex:- male

Birth date:-

(b)(6)

Place of death:- Faluja - Karam -

(b)(6)

Who inform about the death:-

Date of Death:- at the hour 16:00 day Thursday

month four year 2007

Cause of death:- many fire bullets in the

head and chest by unknown armed people

sig.

Physician of Local F.I.O. Hospital

Dr.

(b)(6)

CLAIMS LOG

AMOUNT CLAIMED: \$5,000.00
CLAIMANTS NAME: (b)(6)
DATE CLAIM SUBMITTED: 14 JAN 08
DATE OF INCIDENT: 14 APR 07

PARALEGAL RECOMMENDATION: _____

FCC ACTION: DENY APPROVE OTHER

COMMENTS / REMARKS:

CLAIMANT ALLEGES WHILE HER HUSBAND WAS
DRIVING IN FRONT OF CF BASE, CF SHOT
HIM IN THE HEAD & KILLED HIM.

-NO CLAIMS CARD

-HAVE (b)(3), (b)(6) DOUBLE-CHECK SWORN STATEMENTS



Page 39 redacted for the
following reason:

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DOCUMENT, (b)(6)