

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

# Vehicle Accident

- make sure ~~it~~ this hasn't been  
filed in Yusifiyah

~~if not a duplicate, approve for \$10,000~~

- approve - \$10,000

204-4  
9-APR-08

(b)(6)

T-510



REPLY TO  
ATTENTION OF:

**DEPARTMENT OF THE ARMY**  
Headquarters, 2d Brigade Combat Team  
1st Armored Division  
Camp Striker, Iraq, APO AE 09322

AETV-THO-JA

31-Jan-09

MEMORANDUM FOR RECORD

SUBJECT: Action on Claim of (b)(6)  
08-IK5-T510 / 204-4

1. Facts.

Claimant alleges CF convoy hit the claimants husbands vehicle killing him and damaging the vehicle.

Claimant has requested \$13,500.00

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 \$10,000.00

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

CPT, JA  
Claim Attorney 12D

CENTCOM 017072

08-IK5-T510-00002



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

07 August 2008

Foreign Claims Commission: IK5

RE: (b)(6)

7510 / 204-4  
08-IH1-1048 / ~~1048~~

Dear Claimant:

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

Your damages are of great concern to the United States. In accordance with the cited references and the facts our investigation into your claim, I find your claim is **compensable**. **The United States will compensate you for your losses in the amount of \$~~500,000~~**

**\$10,000**

If you are dissatisfied with this decision and wish to present additional evidence, you have thirty (30) days submit and appeal in accordance with AR 27-20.

عزيزي مقدم الطلب

لقد قدمت مطالبة للحصول على التعويضات عن الاضرار المزعومة والتي لحقت بالملكات الشخصية الخاصة بك, تنظيم الجيش 20-27 و ادارة شؤون US وقد قمت بمراجعة طبك وبدقة وفقا لقانون المطالبات الخارجية المعنون 10, 2734 الجيش 162-27 من اجراءات المطالبة.

ان الاضرار الخاصة بك تعتبر محط اهتمام لشعب الولايات المتحدة, وفقا للوقائع المذكورة في طلبك ومن خلال التحقيق اجد ان طلبك قابل للتعويض, ~~500,000~~ **10,000**.

اذا كنت غير راض عن هذا القرار و ترغب في تقديم ادلة اضافية, لديك ثلاثين يوما ( 30 ) و يقدم الطعن وفقا للمادة ( 27-20 ) من قانون الجيش. AR.

Sincerely,

(b)(6)

21 JAN 09

Claimant

Date

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

(b)(6)

Captain, US Army  
Claims Attorney, IK5

21 Jan 09

CENTCOM 017073

08-IK5-T510-00003

NUMBER AND DATE OF ORDER		DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE COST PER		AMOUNT	
			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.				\$10,000.00	
							<b>TOTAL</b>	\$10,000.00
<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 BY	TITLE	EXCHANGE RATE	DIFFERENCES	Amount verified correct for <i>(Signature or initials)</i>		
		(b)(3), (b)(6)	SFC, U.S. Army Pay Agent	= \$1.00		\$10,000.00		
Pursuant to authority vested in me: <u>21 JAN 09</u> <i>(Date)</i>		(b)(3), (b)(6) <i>(Authorized Certifying Officer)</i>		Foreign Claims Commission 12D <i>(Title)</i>				
PAID BY		CHECK NUMBER	ON ACCOUNT OF U.S. TREASURY	CHECK NUMBER	ON (Name of bank)			
CASH		\$10,000.00	DATE	PAYEE	(b)(6)			
				(b)(6)	PER			
					TITLE			

Previous edition usable: NSN 7540-03-900-7234

**PRIVACY ACT STATEMENT**  
 The information requested on this form is required under the provisions of 51 U.S.C. 522 and 52C, 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 the information will hinder discharge of the payment obligation.



**GIC OPINION ABOUT A CLAIM**

**CASE NO.** (b)(6)

(b)(6)

1. The claimant presented claim card from the US Army proved their responsibility for the death claimant's husband and destroyed his car type prince black color model (b)(6) plate NO (b)(6) /Baghdad.
2. The claimant presented pictures showing the damages into the car.
3. The claimant proved the owner ship of the car which belongs to her husband.
4. The claimant ask amount of \$ **13500.00**.
5. We letting her case compensation go to you.

With our respects

(b)(6)

(b)(6)

LAWYER

(b)(6)

13 April 08

# Claim Department

## "THE CLAIM'S CONTAINS"

The Claimant name:

(b)(6)

- Claim card
- Three pictures
- Death certificate
- Vehicle ID
- Personal document
- 

SIGN: \_\_\_\_\_ (b)(6) \_\_\_\_\_

NAME: --- \_\_\_\_\_

DATE: 9-Apr-08



# Claims Form



To: United States Army Foreign Claims Commission

From: Name: \_\_\_\_\_ (b)(6)

Address: Baghdad \_\_\_\_\_ (b)(6)

Iraqi ID No. \_\_\_\_\_ (b)(6)

I am

- a. A citizen and national of: \_\_\_\_\_
- b. A permanent resident of: Iraq; Baghdad - Iraq
- c. Employed by: \_\_\_\_\_
- d. Check one ( ) an insurer (x) Not an insurer
- e. Check one ( ) A subrogee (x) Not a subrogee

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

\_\_\_\_\_ 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 of authority and fill in the form below for party sustaining the damage or injuries.) \_\_\_\_\_

My claim arose at Al-Youssifeya Baghdad Iraq  
(Town) (City) (Country)

My claim arose on Sep 26 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 26-Sep-07 at 9:00 PM my husband had been  
To hit accident with a U.S. convoy at Al-Youssifeya  
Area. led to Killed my husband and damage car  
For that am asking for compensation.

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

Killed my husband with damage vehicle  
By The U.S. convoy

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- For value the victim	\$ 5000.00
2- For damage vehicle	\$ 8500.00
3-	
4-	
5-	
6-	

Total: \$ 13,500.00

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)

\$ \$ 13,500.00 local 16,200,000 ID

(b)(6)

(Signature of Claimant)

Subscribed before me this 9 day of Apr, 2008.

(b)(6)

(SIGNATURE)

(b)(6)

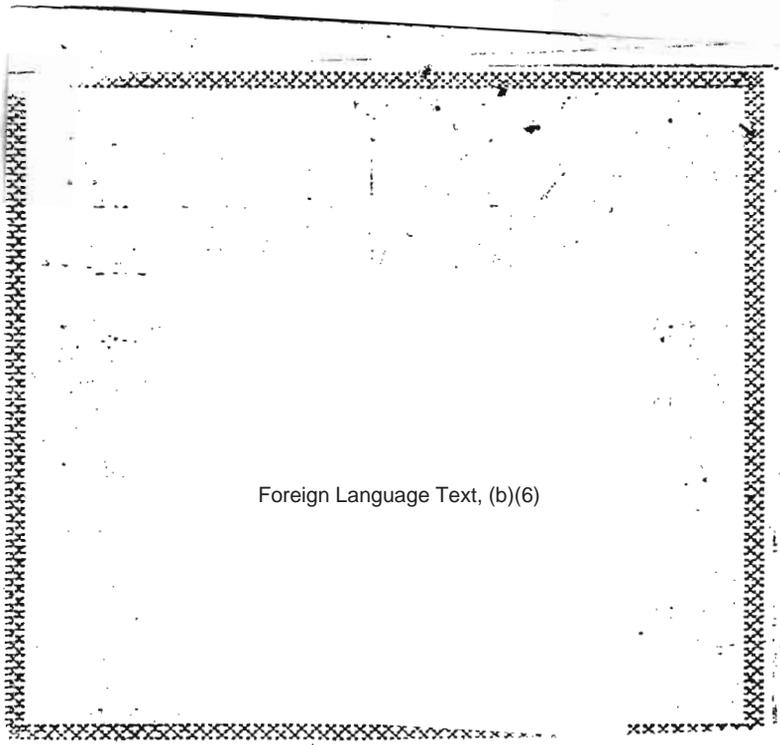
(PRINT NAME)

Pages 10 through 12 redacted for the following reasons:

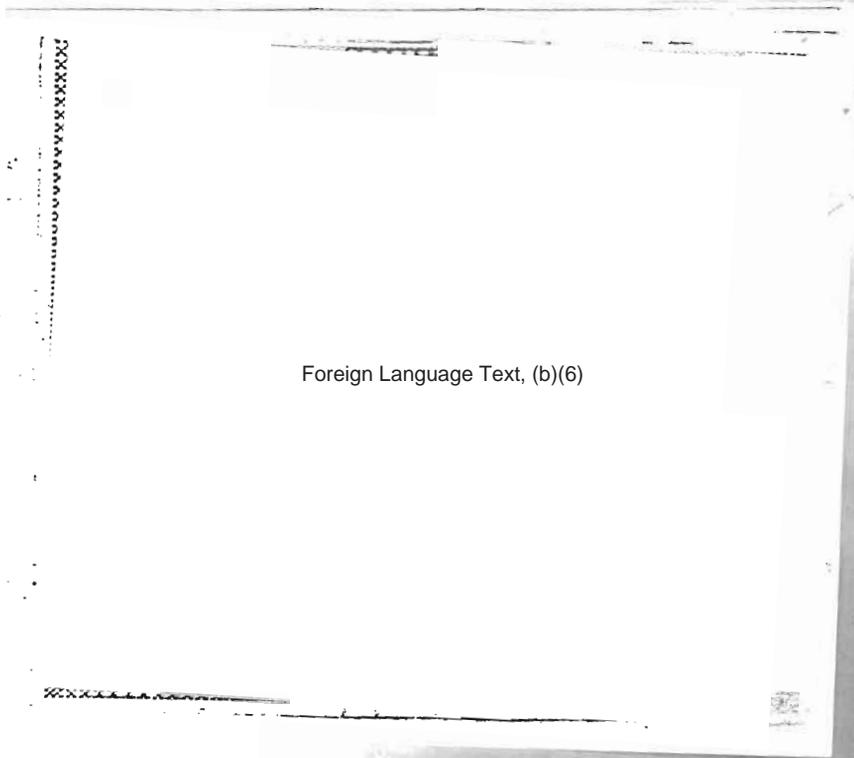
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Foreign Language Text, (b)(6)

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CENTCOM 017088

08-IK5-T510-00018

MULTINATIONAL  
DIVISION - BAGHDAD



### IRAQI CLAIM CARD

السلام عليكم ورحمة الله وبركاته

أخي المواطن الكريم، بمقابل الأضرار التي لحقت بك، سواء كانت أضراراً جسدية من إصابات إلى آخره، أو موت لا سمح الله لأحد من الأقرباء، وكان السبب وراء ذلك القوات الأمريكية فقد يكون لك الحق في التماس. المتقدم ببلاغ والمطالبة بحقوق الرجاء احضار الاتي، هذه البطاقة وهويتك المدنية مع كسل الأوراق الرسمية المتعلقة بهذا الأمر والتي تدعم الموضوع مثل (صور للضحايا، شهادة الشهود، تقرير الشرطة، وإحصائيات بالاستسلام أو التسليم، وثبات الملكية لما حطمت أو تضررت ولما تحاول ان تحصل على تمويش عنه، ورخصة السياقة ان كنت تعمل رخصة).

الرجاء احضار هذه المستندات إلى مركز المساعدة العراقي في معسكر الناجي بوابة كندر، البوابة الهندية في معسكر هالكون، العمودية في معسكر فاب معسكر هول، معسكر كاسو، معسكر دولك، او احد المراكز الحكومية، الشرطة أو مدينة الصدر ٩٠ نيسان - الرشيد الرضائية الرضاة الامانات الكرخ الاطعمية الاكرادة أو مسين البور.

ملاحظة: امتلاك هذا الكرت (المستند) لا يعني الدفع المؤكد.

شكراً لتعاونكم معنا

MULTINATIONAL  
DIVISION - BAGHDAD



### IRAQI CLAIM CARD

The Army may pay claims to Iraqi civilians for property damage, injury and death caused by US Forces.

1. Fill out the required information below.
2. Give this card to the Iraqi civilian, or other appropriate person in the case of death.
3. Direct claimant to the nearest Government Information Center or the Iraqi Assistance Center. Do not promise them anything.
4. Upon return to your FOB, complete a SF 91 or DA Form 2822. Describe the incident completely and forward it to your nearest legal office. NOTE: This information is NOT an admission of liability by the soldiers involved and will be used only to substantiate a claim against the US Army.

UNIT CCO. 2-14 INF

DATE 26 SEP 07

LOCATION (b)(2)High

TYPE OF INCIDENT Car was damaged and this driver was killed by us forces



CENTCOM 017090

08-IK5-T510-00020



CENTCOM 017091

08-IK5-T510-00021



CENTCOM 017092

08-IK5-T510-00022