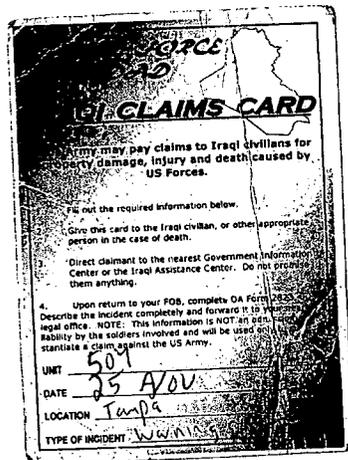


U-1R8-11U





DEPARTMENT OF THE ARMY
HEADQUARTERS, 3RD BRIGADE COMBAT TEAM
OPERATION IRAQI FREEDOM, COB SPEICHER
TIKRIT, IRAQ APO AE 09393

AFZP-VA-HQ

4 February 2006

MEMORANDUM FOR RECORD

SUBJECT: Commander's Emergency Response Program payment to (b)(6)
(Claim Number 06-IR8-116)

1. On 25 Nov 05, (b)(6) husband was shot and injured by U.S. Forces.
2. I certify that funds are available from the CERP to pay (b)(6) in the amount of \$2500.00. This is a condolence payment.
3. The request to pay (b)(6) in the amount of \$2500.00 from CERP has been legally reviewed. There is no legal objection to this payment and it is accordingly approved.

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

CPT, EN
Project Purchasing Officer

CENTCOM 005014



DEPARTMENT OF THE ARMY
OFFICE OF THE STAFF JUDGE ADVOCATE
HEADQUARTERS, 101ST AIRBORNE DIVISION (AIR ASSAULT)
OPERATION IRAQI FREEDOM, COB SPEICHER
TIKRIT, IRAQ APO AE 09393

AFZB-JA-C

2 February 2006

MEMORANDUM OF OPINION

SUBJECT: Claim of (b)(6) 06-IR8-116

- 1. Identifying Data:** (b)(6) y Attorney (b)(6)
- 2. Date and place the incident occurred giving rise to the claim:** The claim occurred on 25 November 2005 in Al Dijail, Iraq.
- 3. Amount of claim and date it was filed:** Claimant filed a claim for \$3,750 on 24 Jan. 2006.
- 4. Jurisdiction:** This request is presented for consideration under the provisions of the Foreign Claims Act, 10 USC Section 2734, as implemented by Chapter 10, Army Regulation 27-20. This claim was properly filed in a timely manner.
- 5. Facts:** The Claimant alleges that her husband was killed by a CF convoy when it rapidly approached from behind. The vehicle was allegedly driving much slower than the convoy, which was traveling about 60 miles per hour. The convoy allegedly shot at the vehicle, killing (b)(6) (b)(6). A claims card left by the unit confirms the incident and that a warning shot was fired.
- 6. Opinion:** "Under AR 27-20, paragraph 10-3, Claims arising "directly or indirectly" from combat activities of the U.S. Armed Forces are not payable. AR 27-20 defines combat activities as, "Activities resulting directly or indirectly from action by the enemy, or by the U.S. Armed Forces engaged in armed conflict, or in immediate preparation for impending armed conflict." Here, warning shots constitute combat activity and accordingly preclude payment of this claim.
- 7. Recommendation:** The claim is denied.

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

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

CPT, JA
Claims Judge Advocate

CENTCOM 005015

Claims Form

To: United States Army Foreign Claims Commission.

From: Name: (b)(6)

POA/ATL: (b)(6)

Power of Attorney: Needed.
Decedents: (b)(6)

Hometown: _____ Iraqi Resident: _____

My claim arose at: Al Di jail (Near Belad.)
(Town) (City) (Country)

My claim arose on: 25 NOV 05
Month Day Year

Proof of Ownership: N/A

Interpreter Approved: _____

Death Certificates (Name, Cause of Death, Age, and Time of Death Consistent with Claimant allegations): Original seen -

COD is bsw to body - Dujail hospital

Interpreter Approved: _____

Legal Expert Opinion: N/A

Interpreter Approved: _____

Witness Statement (Consistent?): ① Passenger - CF shot car. (b)(6) says w/ him, but not mentioned in statement

Interpreter Approved: ② Bullshit witness - "met" this guy.

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.)

Decedent was driving, CF convoy came from behind, started shooting, 50m from the convoy when the shooting occurred. KIA truck - blue
ex 120 m / hour for convoy, claimant driving much slower

occurred on highway - CF stopped & gave first aid to decedent.

Evidence: original death cert, witness x 2

4:00 PM.

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
Wrongful death	\$ 3,750

Total: \$ 3,750

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

W/A

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)

\$ 3,750

(b)(6)

Subscribed before me this 24 day of Jan, 2006.

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



DEPARTMENT OF THE ARMY
OFFICE OF THE STAFF JUDGE ADVOCATE
HEADQUARTERS, 101ST AIRBORNE DIVISION (AIR ASSAULT)
OPERATION IRAQI FREEDOM, COB SPEICHER
TIKRIT, IRAQ APO AE 09393

AFZB-JA-C

MEMORANDUM FOR RECORD

SUBJECT: Waiver of Notification

1. I, the Claimant, hereby agree that if I fail to provide any requested evidence to the CMOC Claims Office within sixty (60) days of the date below or to request a written extension of the 60 day period, such inaction shall constitute an affirmative act of abandonment of my claim, and my claim shall be administratively closed in accordance with the provisions of DA PAM 27-162, paragraph 13-3(f).

2. I further agree that if I wait longer than 60 days from the date below to return to the CMOC to receive notification of the final disposition of my claim or to request a written extension of the 60 day period, this failure will result in denial of the claim. The claim will be administratively closed in accordance with the guidance .

1. انا المشتكي هنا اوافق على اني اذا فشلت في اثبات طلبي بالاملة الكافية الى دائرة الشكاوي (السيماك) خلال مدة (60) يوما من تاريخ اليوم او طلب التمديد (الاستئناف) خلال فترة ستون (60) يوما, هذا سوف يصفى بسبب عدم تكوين تأكيد لقضيتي, وبسبب ذلك قضيتي سوف تترك و تغلق اداريا طبقا للقانون (د,ا,ب, ايم 162-27, من الفقرة 13-3(ف)).

2. وانا كذلك اوافق على اني اذا انتظرت اكثر من (60) ستون يوما من التاريخ المحدد من دائرة (السيماك) لاستلام النتيجة للقرار النهائي لقضيتي او لطلب التمديد خلال الفترة المحددة وهي (60) ستون يوما, هذا سوف يتسبب برفض قضيتي. و القضية سوف تغلق اداريا وفقا للقانون.

Claimant Signature

(b)(6)

المشتكي توقيع

Sworn before _____, on ___ day of ___ 200__.

Pages 9 through 16 redacted for the following reasons:

foreign language