

MULTI-NATIONAL DIVISION-BAGHDAD

Foreign Claims Summary Sheet

Claimant's Name:

Amount of Claim: \$60,000

Date of Incident: 5 November 2006

Date Filed: 4 December 2006

Claim Type: Damage During Raid. Other (Death).

Claimant's Story: U.S. Forces mistaken for "bad guys" and got into fire fight with IP. IP fled to village and alerted villagers that "bad guys" were coming. Villagers armed themselves and started firing at U.S. Forces as they entered the village in pursuit of the IP. Claim is for people who were killed in the gun fight.

Evidence: Death certificates.

Investigation Notes:

FCC Decision
Approve / <u>Disapprove</u>
Comments: <i>Recommended CORP</i>

CLAIMS CHECKLIST

DEATH/INJURY/PROPERTY DAMAGE (Circle One)

Name of claimant (b)(6)
First Middle Last

If death claim, name of deceased _____, and name of representative _____ and relationship to deceased _____

Address of Claimant
Telephone numbers _____

Date of Incident 5 NOV. 2006 Date claim made 4 Dec. 2006

Place of Incident Jifjafa

Describe accident/ event:
on 5 NOV. 2006 U.S. ~~Police~~ Forces came to I.P. Chick-Pan at the night ~~the~~ Police thought they are bad guys so they shot the U.S. Soliders and U.S. forces shot at the chick-Pan after that the I.P. escaped to our village and they told us the bad-guys shot us you shud protect your self and they told us the bad guys are following us to your village. So we shot sire twerdes the soliders because we thing they are bad guyer after

- Death Certificate of Death Document. That the soliders shot at us and kille two personer (b)(6) and (b)(6) and they came to the house and search his
- Need Medical Records to substantiate the injury.
- Need Identification Document with photo.
- If person is a representative of the claimant of a survivor of the deceased, need document to establish the right of the rep to settle claim. and they took out weapons and \$200.
- Need photo of damage to vehicle.
- Need estimate of the damages or receipt for repairs.
- Need title or other proof of ownership
- Need an documents given to the claimant at the scene by CF.

FCA or CERP (Circle) _____
Amount claimed \$60000 Amount offered _____ Accepted Yes/No _____

Officer handling claim _____
Interpreter _____
Tracking number _____

Page 3 redacted for the following reason:

(b)(6), Foreign Language

(b)(6), Foreign Language Text

SERVICEMEMBERS

This is a valid claims form. Please record the date, time, and location this form was received. Submit this document to your closest Unit Claims Officer or Judge Advocate.

Page 5 redacted for the following reason:

Foreign Language

(b)(6), Foreign Language

death certificate

- Name

(b)(6)

- his birth day

(b)(6)

- his died date

(b)(6)

- his address

(b)(6)

- marriage status single

(b)(6), Foreign Language

death certificate

- name

(b)(6)

- his mother name

(b)(6)

- his birth day

(b)(6)

- his death date 5 Nov. 06

- marriage status Married

- his address

(b)(6)

(b)(6)

- Identification For

(b)(6)

- his tribe

(b)(6)

his mother name

(b)(6)

his I.D No.

(b)(6)

(b)(6), Foreign Language

(b)(6), Foreign Language

Saik I.d

his name

(b)(6)

Trib Name

(b)(6)

I.d No.

(b)(6)

issu date

(b)(6)