

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

2-023.5

08-0/144

(b)(6)

(b)6 Foreign Language

FOREIGN CLAIMS COMMISSION COVER SHEET

Claim Number: 2.0235

USARCS NUMBER: 08-0144

Date Received: 4/4/2008 12:00:00 AM

Name: (b)(6)

Address: (b)(2)High (b)(6)

Claim Summary: Claimant's son killed by small arms involving C.F.

Date of Incident: 1/21/2008 12:00:00 AM

Amount Requested: \$12000.00

(b)(5), (b)(2)High

N (b)(5)

CERP CONDOLENCE CONSIDERATION

(b)(2)High, (b)(5)

Death Certificate

Republic of Iraq the ministry of health and section of census health and life

Organizing date 21/01/08

Certificate Number (b)(6)

- 1- Name and surname of the dead person (b)(6)
- 2- Sex: Male
- 3- Nationality: Iraqi
- 4- Religion: Muslim
- 5- Marital status: Single Married..... widower..... Divorced.....
- 6- Date of birth: / / (b)(6)
- 7- Place of birth: County..... Province...Baghdad...
- 8- Permanent resident: House..... Street..... Mahalla..... County..... Province.....
- 9- The death date :(writing) Time..... Date...21..... Month...01..... year...2008.....
- 10- father's name: (b)(6)
- 11- Mather's name (b)(6)
- 12- The reporter name about deatn: New Baghdad police station
- 13- - His relation in dead person:
- 14- The Medical death certificate: (A)..... correction complete (B).....by memorandum of the new Baghdad police station numbered (b)(6) (b)(6)
- 15- I testify this death happened by the proving of reasons above: shooting

I sign I'm the Dr (b)(6) the Dr inmedical Justice,I did autopsy of the dead corps

..... (b)(6) .. sender by New Baghdad according by the memorandum numbered

..... (b)(6) , Issued in 21/01/08

The discovering on the dead corps

New (b)(2)High Police Station

21/01/2008

At 600 am we told from one of our patrols in new (b)(2)High the call for the help (b)(1) the Coalition Forces by shooting on person and killed him immediately in A-I qunal main street on this we moved to accident place

- 1- The Accident place far from our station nearly (b)(1) km
- 2- The accident place located (b)(2)High main street
- 3- The accident place located between in meddle (b)(2)High but in other side of the old gas station
- 4- I viewed the corps killed and he's between (b)(6) years old
- 5- The dead person killed by shooting by American (b)(2)High
- 6- I viewed the dead corps in the Black hair in the white skin worn the tracksuit and red shirt and worn the sport green stocking

Major

(b)(6)

(b)(2)High

Police Station

investigation continues

21/01/08

At 600 am in that day we told by police of (b)(2)High by call for the help, (b)(2) that they got call from coalition forces by their shooting on person by the (b)(2)High and killed him immediately. And the Iraqi police patrol got letter by this writing, BSTB Top Cpt. (b)(6) and continues the investigation that organized for that.

Major

(b)(6)



REPLY TO
ATTENTION OF:

AFZS-Z-JA

DEPARTMENT OF THE ARMY
HEADQUARTERS, 4TH BRIGADE COMBAT TEAM
10TH MOUNTAIN DIVISION (LIGHT)
CAMP LOYALTY, IRAQ 09313

17 June 2008

MEMORANDUM FOR RECORD

SUBJECT: DISAPPROVAL OF FOREIGN CLAIM I15/08-0144:

Claim of: (b)(6)
Address: (b)(2)High Iraq. (b)(6)

Date Filed: 4/4/2008 12:00:00 AM

Amount Claimed: \$12000.00

Claimed Loss: Claimant's son killed by small arms involving C.F.

Claim Number: 2.0235

1. Your above-mentioned claim is disapproved.
2. This incident **does not** comply with the provisions of the Foreign Claims Act, 10 U.S.C. Section 2734, as implemented by Chapter 10, AR 27-20. This claim was filed in a timely manner. This claim did occur outside the United States.
3. The reason for the disapproval of this claim is code 3:
 1. Loss was a result of Combat Operations
 2. The filing claimant is an improper claimant
 3. Claim lacked evidence supporting U.S. negligence or fault
 4. Claim lacked evidence to prove a loss
 5. Loss was a result of Anti-Coalition Forces
 6. Claimant Filed for Reconsideration of Previous Claim and filed no new evidence.
 7. Statute of Limitations Expired.
4. If you are dissatisfied by this action, AR 27-20 provides that you may request that the decision be reconsidered. Any such request must be forwarded to this office for FCC consideration. There is no prescribed format for such a request. However, it should describe the legal and/or factual basis for relief. Any request for reconsideration must be made, in writing, within 30 days of receipt of this letter. The FCC's action on reconsideration is final and conclusive by law.
5. POC for this memorandum is SSG (b)(3), (b)(6) FOB Loyalty, @ VOIP 675-1018.

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

CPT, JA
FOREIGN CLAIMS COMMISSION

CENTCOM 020077

08-0144-00007



REPLY TO
ATTENTION OF:

DEPARTMENT OF THE ARMY
HEADQUARTERS, 4TH BRIGADE COMBAT TEAM
10TH MOUNTAIN DIVISION
MULTI-NATIONAL DIVISION-BAGHDAD
FOB LOYALTY, IRAQ APO AE 09390

JAN 28 2008

AFZS-LP-Z-CO

MEMORANDUM THRU FOR Commander, Multi-National Division-Baghdad, FOB Liberty,
Iraq APO AE 09390

SUBJECT: AR 15-6 Recommendation

1. Upon review of the investigation into in the facts and circumstances surrounding the events of 21 January 2008 involving BSTB assets which resulted in the death of an Iraqi local national, I recommend you approve disapprove the investigation.

2. Comments:

THE (b)(2)High TEAM OPERATED WITHIN THE ROE. THE PROCEDURES & SYSTEMS FOR THE SNIPER TEAM & BDOC WERE NOT PROPERLY INTEGRATED. PROCEDURES HAVE NOW BEEN PUT IN PLACE TO ENHANCE THE SNIPER TEAM ENGAGEMENT CRITERIA.

3. The point of contact for this memorandum is CPT (b)(3), (b)(6) at VOIP 675-1052.

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

COL, IN
Commanding



DEPARTMENT OF THE ARMY
 HEADQUARTERS, 4th BRIGADE COMBAT TEAM
 10th MOUNTAIN DIVISION
 FORWARD OPERATING BASE LOYALTY, IRAQ 09390

REPLY TO
 ATTENTION OF

AFZS-LP-Z

28 January 2008

MEMORANDUM FOR Commander, 4th BCT, 10th MTN DIV, FOB Loyalty, Iraq 09390

SUBJECT: Legal Review of AR 15-6, Death of Local National (b)(6) 21 JAN 08)

1. In accordance with AR 15-6, paragraph 2-3, I have reviewed the AR 15-6 investigation into the facts and circumstances involving the operation conducted by HHC, Brigade Special Troops Battalion and attached elements on 21 January 2008 which resulted in the death of an Iraqi local national (LN). I make the following determinations:

a. The proceedings comply with the legal requirements under AR 15-6 and contain no material errors or violate any individual's legal rights.

b. Sufficient evidence supports the findings. The investigation officer (IO) found that members of a sniper element from the 3-89th Cavalry Squadron (tasked and controlled (TACON) to HHC, BSTB) properly engaged LN, Mr. (b)(6) with lethal force resulting in his death in accordance with the Rules of Engagement. Specifically, the IO found Mr. (b)(6) was on foot in an historical improvised explosive device (IED) hotspot at approximately 0350 hours. Furthermore, Mr. (b)(6) actions during this time were consistent with someone emplacing an IED in that he was carrying a large to medium sized bag which was giving off a heat signature and had left the bag in the roadway median and walked away from it. After observing Mr. (b)(6) activity for several minutes, the sniper team leader, SSG (b)(3), (b)(6) gave the order to fire to snipers SGT (b)(3), (b)(6) and SGT (b)(3), (b)(6). Both snipers acted upon this order resulting in the death of (b)(6). Subsequently, it was discovered that (b)(6) bag contained discarded aluminum cans which he was apparently collecting at the time of his death. However, this after the fact discovery does not change the real time observations of Mr. (b)(6) actions by the (b)(2)High team. Therefore, the IO properly found, based upon good evidence and given the totality of the circumstances, the actions of the Soldiers were in accordance with the Rules of Engagement as they reasonably perceived Mr. (b)(6) as having hostile intent as an IED emplacer.

c. The IO's recommendations are consistent with his findings.

2. Point of contact for this memo is the undersigned at (b)(3), (b)(6), (b)(2)High or VOIP 675-1052.

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

CPT, JA
 Trial Counsel / Ops Law



REPLY TO
ATTENTION OF:

DEPARTMENT OF THE ARMY
HEADQUARTERS, 4TH BRIGADE COMBAT TEAM
10TH MOUNTAIN DIVISION
MULTI-NATIONAL DIVISION-BAGHDAD
CAMP LOYALTY, IRAQ APO AE 09390

JAN 21 2008

AFZC-B-CDR

MEMORANDUM FOR MA [REDACTED] (b)(3), (b)(6) HHC, 4th Brigade Combat Team, 10th Mountain Division, Multi-National Division-Baghdad, FOB Loyalty, Iraq APO AE 09390

SUBJECT: Appointment as Investigating Officer under AR 15-6

1. You are hereby appointed as an Investigating Officer pursuant to *AR 15-6, Procedures for Investigating Officers and Boards of Officers*, to conduct an investigation into the facts and circumstances surrounding the operation conducted by HHC, BSTB, 4th BCT, and attached elements which resulted in the death of an Iraqi local national on 21 January 2008.
2. You will issue Findings and Recommendations that cover the following areas of inquiry:
 - a. Assess the use of force with respect to the Rules of Engagement and the Law of Armed Conflict. Identify the procedures in place at the time of the incident to authorize use of force.
 - b. Identify all individuals wounded or killed. Determine whether wounded or killed local nationals were engaged in hostilities against Coalition Forces at the time of the incident.
 - c. Determine whether local nationals involved in the incident should receive compensation for injuries, death or damages to property.
 - d. Identify any other relevant matters that you discover in the course of your investigation.
3. Your legal advisor is CPT [REDACTED] (b)(6) 4th Brigade Operational Law Team, VOIP 675-1052, who will give you an in-brief before you begin your investigation and be available to assist you during the investigation.
4. You may speak with any and all individuals that you believe have information pertinent to your investigation. You will obtain guidance from your legal advisor if in the course of your investigation you determine that completion thereof requires examining the conduct or performance of, or may result in Findings and Recommendations adverse to, a person senior to yourself.
5. If during the course of your investigation you come to suspect that an individual you are questioning may have committed a crime, you will advise that individual of his or her rights under Article 31, UCMJ, or the Fifth Amendment as appropriate. You will administer and record such rights advisements on DA Form 3881.

AFZC-B-CDR

SUBJECT: Appointment as Investigating Officer under AR 15-6

6. All witness statements will be sworn and, if possible, submitted on DA Form 2823. If circumstances preclude you from obtaining a sworn statement, or if you obtain a statement telephonically, you will summarize such a statement in a Memorandum for Record and swear to the accuracy of your summary.

7. Your report will be submitted to this office on DA Form 1574 together with all evidence marked as Exhibits, and an Index to said Exhibits. Your Findings must be based on the evidence you include as Exhibits and your Recommendations must be based on your Findings.

8. Your complete report will be submitted to this office no later than 20 January 2008. Requests for delays should be submitted to me in writing.

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

COL, IN
Commanding

Claims Form

(b)(6)

Claim# 2-023-5
 Date: 18th Feb 2008
 GICof / 9 NISSAN

To: United States Army Foreign Claims Commission

Claimant Name (b)(6)

Relationship: The Victim's Father

National of: Iraqi Claimant's Address: Neighborhood

(b)(2)High

Q (b)(2)High

St# / H# / Ph:

(b)(6)

Have you filed a claim before? Yes NO

Damage type: Death Injury Car House Furniture Other

Place of incident: St. In front of camp Loyalty Town. Zeona

City: Baghdad Country: Iraq

Date of incident: Time 6:00 AM Day: 21st Month: Jan. Year: 2008

Give a brief statement of the accident or incident.

His son was carrying a big pack on his back. The camp Loyalty tower opened fire towards him and caused the death.

Did you receive a claims card from the military unit that caused the incident?

Yes No They didn't stop

List in detail the value of the property damage and itemized expenses resulting from the property damage or personal injury: (Attach bills)

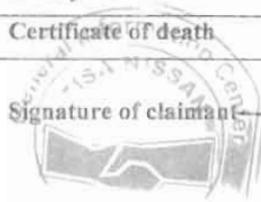
Item	Amount: \$	Amount: ID
Death	12,000.00	/
	/	/

Total 12,000.00 U.S.D

List of attached document.

Identity	<input checked="" type="checkbox"/>	House document	<input type="checkbox"/>
Certificate of Nationality	<input checked="" type="checkbox"/>	Car document	<input type="checkbox"/>
Ration card	<input checked="" type="checkbox"/>	Claim card	<input type="checkbox"/>
Residence card	<input checked="" type="checkbox"/>	Bill	<input type="checkbox"/>
Picture	<input type="checkbox"/>		
IP Report	<input checked="" type="checkbox"/>		
Certificate of death	<input checked="" type="checkbox"/>		

Signature of claimant



(b)(6)

Date: 18th Feb 2008

Print Name - Sadiq Hassan

CLAIM FOR DAMAGE, INJURY, OR DEATH		INSTRUCTIONS: Please read carefully the instructions on the reverse side and supply information requested on both sides of this form. Use additional sheets if necessary. See reverse side for additional instructions.		FORM APPROVED OMB NO. 1103-0009	
1. Submit To Appropriate Federal Agency: 506th RCT Legal Office Camp Loyalty, Iraq APO AE 09390		2. Name, Address of claimant and claimant's personal representative, if any. (See instructions on reverse.) (Number, street, city, State and Zip Code) (b)(6) (b)(2)High			
3. TYPE OF EMPLOYMENT <input type="checkbox"/> MILITARY <input checked="" type="checkbox"/> CIVILIAN	4. MARITAL STATUS M	5. DATE AND DAY OF ACCIDENT 21 st , Jan., 2008	7. TIME (A.M. OR P.M.) 6:00 AM		
8. Basis of Claim (State in detail the known facts and circumstances attending the damage, injury, or death, identifying persons and property involved, the place of occurrence and the cause thereof.) (Use additional pages if necessary.) My son was carrying a big pack on his back. The camp Loyalty tower opened fire towards him and caused death to him.					
9. PROPERTY DAMAGE NAME AND ADDRESS OF OWNER, IF OTHER THAN CLAIMANT (Number, street, city, State, and Zip Code) Same as above BRIEFLY DESCRIBE THE PROPERTY, NATURE AND EXTENT OF DAMAGE AND THE LOCATION WHERE PROPERTY MAY BE INSPECTED. (See instructions on reverse side.) U.S. Forces murdered my son.					
10. PERSONAL INJURY; WROFUL DEATH STATE NATURE AND EXTENT OF EACH INJURY OR CAUSE OF DEATH, WHICH FORMS THE BASIS OF THE CLAIM. IF OTHER THAN CLAIMANT, STATE NAME OF INJURED PERSON OR DECEDENT.					
11. WITNESSES NAME ADDRESS (Number, street, city, State, and Zip Code)					
12. AMOUNT OF CLAIM (in dollars) 12a. PROPERTY DAMAGE 12b. PERSONAL INJURY 12c. WROFUL DEATH 12d. TOTAL (Failure to specify may cause forfeiture of your rights.) 12,000.00 12,000.00 U.S.D					
I CERTIFY THAT THE AMOUNT OF CLAIM COVERS ONLY DAMAGES AND BENEFITS CAUSED BY THE ACCIDENT ABOVE AND AGREE TO ACCEPT SAID AMOUNT IN FULL SATISFACTION AND FINAL SETTLEMENT OF THIS CLAIM					
13a. SIGNATURE OF CLAIMANT (See instructions on reverse side.) (b)(6)				14. DATE OF CLAIM 18 th Feb 2008	
CIVIL PENALTY FOR PRESENTED FRAUDULENT CLAIM The claimant shall forfeit and pay to the United States the sum of \$2,000, plus double the amount of damages sustained by the United States. (See 31 U.S.C. 3729.)			CIVIL PENALTY FOR PRESENTED FRAUDULENT CLAIM OR MAKING FALSE STATEMENTS Fines of up to \$5,000 or imprisonment for not more than 5 years or both. (See 18 U.S.C. 207, 1011.)		



STANDARD FORM 95 (Rev. 7-05)
PRESCRIBED BY DEPT. OF JUSTICE
28 CFR 14.2
LSAPPC V1 09

Pages 14 through 15 redacted for
the following reasons:-----

(b)6 Foreign Language

Foreign Language Text, (b)(6)

Foreign Language Text, (b)(6)

Foreign Language Text, (b)(6)

Pages 19 through 21 redacted for the following reasons:

(b)6 Foreign Language

Foreign Language Text, (b)(6)

Pages 23 through 24 redacted for the following reasons:

(b)6 Foreign Language



Foreign Language Text, (b)(6)

Pages 26 through 29 redacted for the following reasons:

(b)6 Foreign Language