

FILE NUMBER <b>07-114-7006</b>	For use of this form, see AR 27-20: the proponent agency is the Office of The Judge Advocate General.	DATE <b>16 Oct 06</b>
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DATE OF INCIDENT	PLACE OF INCIDENT <b>(b)(6) Hawija, Iraq</b>
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I hereby agree to accept the sum of **\$2,500.00** in full satisfaction and final settlement of all claims which I have or may have against the United States, its officers, agents, and employees, for all damages and injuries, if any, incurred by me

موافقة المدعى

أني المدعي، أوافق بموجب القرار المذكور كأن يكون تسوية أو حل وسط وأن يكون هذا القرار حسمي ونهائي لي و لكل من يتوب عني وأن تكون هذه الموافقة ممتوحة كلياً متى أو من يتوب عني عن كل الدعاوى المرفوعة ضد الولايات المتحدة والعاملين لها وبخض النظر عن طبيعتها الآن وفيما بعد فيما يخص الجروح الجسدية والمادية المرئية والغير مرئية وحتى الوفاة الطبيعية وكذلك أية خروقات قانونية أو أي فعل أو لامبالاة ناتجة عن ذلك أو علاوة على ذلك أوافق على التعويض عن الأضرار التي لحقتني ولا لحمل أية ضغينة للولايات المتحدة والعاملين معها من موظفين أو مستخدمين للإضرار الجسدية والمادية وبضمنها الوفاة عن طرفة الخطأ التي تتحد عنها الأفعال. الاحتمالات الناتجة عن ذلك.

TYPED OR PRINTED NAME OF CLAIMANT <b>(b)(6)</b>	SIGNATURE OF CLAIMANT <b>(b)(6)</b>
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PREVIOUS ADDRESS OF CLAIMANT (number and street or rural route, city, town or post office, county, state and zip code)

**(b)(6)** **1 JUL 74**

PREVIOUS EDITION OF THIS FORM WILL BE USED UNTIL EXHAUSTED.

CLAIMS SETTLEMENT AGREEMENT

USAPPC V1.00



**DEPARTMENT OF THE ARMY**  
**3<sup>rd</sup> Infantry Brigade Combat Team Command Judge Advocate**  
**3<sup>rd</sup> Infantry Brigade Combat Team**  
**FOB Warrior, Kirkuk, Iraq, APO AE 09338**

APVG-ZZO-JA

8 October 2006

MEMORANDUM FOR Commander, 3<sup>rd</sup> Infantry Brigade Combat Team, 25<sup>th</sup> Infantry Division, FOB Warrior, Kirkuk, Iraq, APO AE 09338

SUBJECT: 3<sup>rd</sup> IBCT CERP DISCRETIONARY BULK FUND.

1. The purpose of this memorandum is for the use of the 3<sup>rd</sup> IBCT, 25<sup>th</sup> IN DIV CERP Discretionary Bulk Fund for a condolence payment to (b)(6) Mrs. (b)(6) claims that claimant's husband was driving a minibus when he was accidentally shot by CF. This incident is not a cognizable claim under the Foreign Claims Act (Chapter 10, AR 27-20) because the damages were incident to combat.

2. Description of how these monies will support the 3<sup>rd</sup> IBCT, 25<sup>th</sup> IN DIV Commander's intent and spending priorities for CERP funds: This payment will support the strong relationship the 3<sup>rd</sup> IBCT has with the local populace by expressing our regret for the damages.

3. List the specific items or services requested in the table below:

#	Items to be purchased or service rendered	Unit Price	Quantity	Total Price
1	Payment for her husbands death	\$2,500.00	1	\$2,500.00
<b>Total:</b>				<b>\$2,500.00</b>

4. The transaction can be completed at one time with one payment.

5. POC for this action is CPT (b)(3)(b)(6) VOIP (b)(2)High, (b)(3)(b)(6) @us.army.mil.

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

CPT, JA  
 Foreign Claims Commissioner

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

I approve/disapprove this purchase.

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

MAJ, FA  
 Executive Officer

CENTCOM 007857

OFFICE OF THE COALITION PROVISIONAL AUTHORITY (OCA)  
PROJECT WORKSHEET

**TYPE OF OPCA PROJECT:** Regional Level Quick Impact Fund

**MILITARY UNIT COORDINATING PROJECT:** HHC, 3IBCT, 25<sup>th</sup> IN DIV, Judge Advocate

**MILITARY UNIT CONTACT INFO FOR PROJECT**

**NAME:** (b)(3)(b)(6)  
**PHONE: VOIP:** (b)(2)High  
**NIPR EMAIL:** (b)(3)(b)(6) @us.army.mil

**NAME THE PROJECT:** Condolence Payment for the death of her husband to (b)(6)  
(reference Claim No. 07-I14-T006)

**PROJECT LOCATION:** Kirkuk, Iraq

**PROJECT DESCRIPTION:** Condolence Payment to (b)(6)

**DESCRIBE DIRECT BENEFIT TO IRAQI POPULATION:** Condolence payments are cash payments to local nationals, or to their family members, who suffer death or injury or property damage caused by US forces in the performance of official duty. US forces make Condolence payments without reference to fault by either the local national or US forces, as an expression of sympathy and good will and in the best interest of the US Government.

**COST (U.S. Dollars) AND JUSTIFICATION:** \$2,500.00. (b)(6) claims claimant's husband was driving a minibus when he was accidentally shot by CF on 3 July 2006.

(b)(6) does not have a cognizable claim under the Foreign Claims Act (Chapter 10, AR 27-20) because the damages were incident to combat.

**NAME AND POSITION OF IRAQI WHO WILL ASSUME RESPONSIBILITY FOR THE COMPLETED PROJECT (Responsible Iraqi):** X (b)(6) \_\_\_\_\_

**ESTIMATED DAYS REQUIRED TO COMPLETE PROJECT:** 1



DEPARTMENT OF THE ARMY  
3<sup>rd</sup> Infantry Brigade Combat Team Command Judge Advocate  
3<sup>rd</sup> Infantry Brigade Combat Team  
FOB Warrior, Kirkuk, Iraq, APO AE 09338

APVG-ZZO-JA

8 October 2006

SUBJECT: Claim of (b)(6) 07-I14-T006

1. Claimants name and address: (b)(6) Haweja, Iraq.
2. Incident date and place the incident occurred giving rise to the claim: Incident occurred on 3 July 2006 in Haweja, Iraq.
3. Amount of claim and filing date: Claimant filed a claim in the amount of \$5,000.00 on 4 October 2006.
4. Chapter the claim was considered under and a brief description of the incident or of the issues raised by the claimant on reconsideration: Foreign Claims Act and Chapter 10, AR 27-20; claim filed for her husbands death due to CF.
5. Facts:
  - a. (b)(6) claims that on 3 July 2006, claimants husband was driving a minibus when he was accidentally shot by CF.
  - b. There was a death certificate, ID cards, police reports included in the submitted claim.
  - c. The incident was able to be verified by the unit responsible.
6. Opinion:
  - a. In order to form a basis for a claim under the FCA, the incident has to occur outside of the Unites States and be from either non-combat activities of the U.S. Armed Forces or by negligent or wrongful acts of military members or civilian employees of the Armed Forces.

CENTCOM 007859

APVG-ZZO-JA  
SUBJECT:

(b)(6)

07-I14-T006

- b. There is insufficient evidence to suggest that this incident arose out of the negligence and/or wrongful acts of the United States Armed Forces. Any appeal must be submitted within 30 days.
7. Action: This claim is not payable under the FCA for the above mentioned reasons. Consequently this claim for \$5,000.00 is denied.

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

U.S. Army  
Foreign Claims Commissioner

CENTCOM 007860

<b>CLAIM FOR DAMAGE .OR INJURY DEATH</b>	<b>INSTRUCTION:</b> Please read carefully the instruction on the reverse side and supply7 information requested on both sides of this form .Use additional sheets (s)	<b>person From approve MBC</b>
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<b>1.submitt to appropriate Agency</b> AMER	<b>2-.Name of claimants &amp; Address</b>  (b)(6)
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07-II4-T006

<b>3.TYPE OF EMPLOY</b> FEMALE	<b>4.DATE OF BIRTH</b> (b)(6)	<b>5.MARITAL STATUS.</b> Married	<b>6.DATE &amp; DAY OF ACCIDENT</b> 03-july-2006	<b>TIME:</b> 6,45 pm
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**The claim**

On the mentioned date and time the seat of the coalition forces and Iraqi military was attacked by mortar bombs for this reason they started shooting randomly causing accidentally death to three people whom one of them was husband of the claimant his name is (b)(6) , who was driving minibus belongs to (b)(6) at that time in the town of Haweja .

She added that they went to the hospital to stand on the casualties they caused and to investigate the state of the injuries; they found out later that they wrongfully killed a wrong person whom they suspect one of the terrorist who attack them.

**PROPERTY DAMAGE**

NAME AND ADDRESS OF OWNER THAN CLAIMANT (NUMBER, street, city, state, city, state, and, zip code)

**10** **Personal injury/wrongfully death**

Wrongfully killing

**WITNESSES**

NAME	ADDRESS

**Amount of claim (IN Dollars)**

<b>12A PROPERTY</b>	<b>12b PERSONAL INJURY</b>	<b>12c WRONGFUL DEATH</b>	<b>12A</b>

**I CERTIFY THAT AMOUNT OF CLAIM COVERS ONLY DAMAGES AND INJURY CAUSED BY THE ACCIDENT ABOVE AND AGREE TO ACCEPT SAID AMOUNT IN FULL SATISFACTION AND FINAL SETTLEMENT OF THIS CLAIM**

<b>13- SIGNATURE OF CLAIMANT</b> (b)(6)	<b>13b.Phone number of signatory</b> (b)(6)	<b>14c.Date of claim</b> 01-OCT-2006
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<b>CIVIL PENALTY FOR PRESENTING FRAUDULENT CLAIM</b>	<b>CRIMINAL PENALTY FOR PRESENTING FRAUDULENT CLAIM OR MAKING FALSE STATEMENTS</b>
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## Death certificate

Health department *Kirkuk*  
Number (b)(6)

Date: *2006*

Deceased name: (b)(6)

Sex: *Male*

Nationality: *Iraqi*

Religious: *Muslim*

Job: (b)(6)

Statuses: *Married*

Birth date: (b)(6)

Date of death: *04-July-2006*

Place of death: *Hawija*

Reason of death: (b)(6)

Fathers name

Signed by coroner doctor (b)(6) on *4-07-2006*

Foreign Language Text, (b)(6)

Identification card

Office: KIRKUK

Number: 303285

Name: (b)(6)

Father's name: (b)(6)

Mother's name: (b)(6)

Gender: Male

Issue date: 2001

Religious: Muslim

Date of birth: (b)(6)

Place of birth: (b)(6)

Statuses: Married

Wife's name: (b)(6)

Physical disablement:

(b)(6)

Identification card

Office: Kinkuk

Number: (b)(6)

Name: (b)(6)

Father's name: (b)(6)

Mother's name: (b)(6)

Gender: Female

Issue date: 2001

Religious: Muslim

Date of birth: (b)(6)

Place of birth:

Status: Married

Husband/Wife's name: (b)(6)

Physical disablement:

(b)(6)

Foreign Language Text, (b)(6)

from police station of Haweys to chief Director  
of Haweys

subject / Urgent Telegram

On 6.45 pm at this day E. F. S. CENTCOM 007866  
sea attacked by monitors which made E. F.

Foreign Language Text, (b)(6)

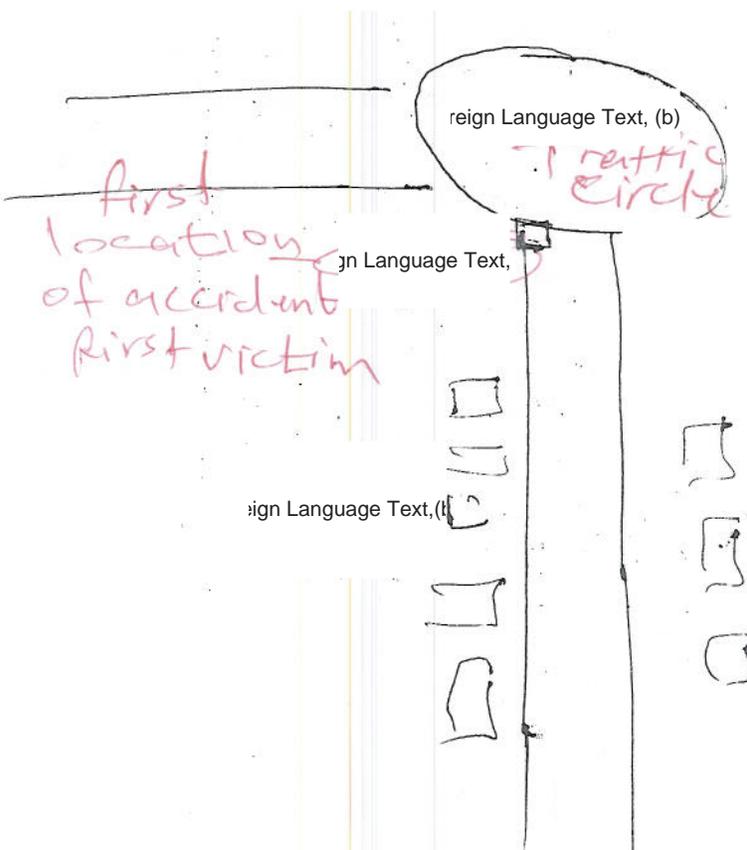
- Accident in 04-2006 - investigation ~~was~~ made on the scene of the accident and found:
  - location is in hallway toward railway station
  - Accident is caused by a random shooter but

Foreign Language Text, (b)(6)

- Car belongs to [redacted] (pink) was [redacted] even with hail of bullets [redacted] car

Foreign Language Text, (b)(6)

Foreign Language Text, (b)(6)



Foreign Language Text, (b)(6) and location of killing to (b)(6)



Foreign Language Text, (b)(6)

Foreign Language Text, (b)(6)

organized by

Foreign Language Text, (b)(6)