

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

23 March 2006

MEMORANDUM OF OPINION

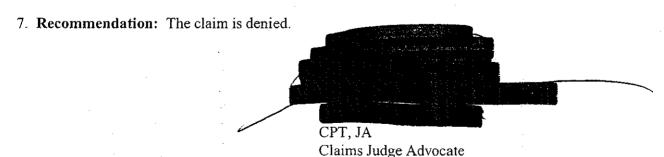
SUBJECT: Claim of

: 06-IR8-468

1. Identifying Data:

by Attorney

- 2. Date and place the incident occurred giving rise to the claim: The claim occurred on 1 January 2005 in Samarra, Iraq.
- 3. Amount of claim and date it was filed: Claimant filed a claim for \$6,000 on 21 March, 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, standing in the street when a CF convoy, pulling out of the parking lot of the Youth Center, opened fire, killing him. The incident allegedly occurred in the Garbia quarter of the city. A SIGACTS investigation revealed that a TF 3-69 patrol was attacked with RPG fire. At least one local national was killed when he drove his vehicle in between the cross fire between CF and AIF.
- 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, claimant's injury was caused during a combat engagement with AIF.



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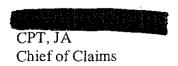
MEMORANDUM FOR Record

SUBJECT: Claimant Denial

- 1. This is in response to your claim against the United States Government. Your claim has been reviewed under the Foreign Claims Act, 10 U.S.C. 2734, as implemented by Army Regulation 27-20, Chapter 10. I regret to inform you that your claim has been denied.
- 2. Your claim has been denied for the following reasons:
 - a. There is not enough evidence to prove your claim.
 - b. The evidence shows that United States Forces did not cause the damage.
 - (c) The evidence shows that the damage was caused during combat.
 - d. The evidence shows that the damage was caused by your own negligence or wrongdoing.
 - e. The evidence shows that your claim was fraudulent.

f. Other:	
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- 3. If this is the first time your claim has been viewed by this office, you may submit an appeal. This office must receive the appeal no later than 30 days after receipt of this message. The appeal must also contain additional evidence supporting your claim. If the appeal is sent after 30 days have passed, or does not provide additional evidence, then the appeal will be denied.
- 4. POC is the 101st Airborne Division (Air Assault) Claims Office at DSN 318-845-1022.



TF Band of Brothers Claims Intake Form

To: United States Army Foreign Claims Commission.
From: Name:
Power of Attorney provided and interpreter approved:
Decedents:
Decedents.
Hometown: Samura Diraqi Resident:
My claim arose at: Samaria.
My claim arose on: (5 July) (City) (Country)
Month Day Year Proof of Ownership: Year
□ VIN Match:
Interpreter Approved:
Death Certificates (Name, Cause of Death, Age, and Time of Death Consistent with Claimant allegations): 200 - bollest in his body
□ Interpreter Approved:
Medical Report/Legal Expert Opinion:
Interpreter Approved:
Witness Statement (Consistent?): Drandon goy - cf shot fre decessed.
□ Interpreter Approved: (E) < ous N - husband & my dayshen
- inconsistent -> weind family Rebut
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.)
Youth center - CF thece Houses Across the
effect. by standing in front of the home.
12 Hunvae shot the C'S husband (Age 65).
CF was pulling must from the Youth center, of
Shot the old goy, unknown sine
West Samara - GARDA Q+1
Evidence:
000193

	f property damage and itemized expenses resulting from the property: (Attach bills and receipts, if applicable.)	
Item Wong Fil dear	Amount Amount	
		-
	6,000	
	6,000	-
	Total:	,
•		
I claim as damages: (Indica \$ _2,500	ate amount in U.S. dollars and local currency)	4.
		:
	(Signature of Claimant)	•
	lum 0	
Subscribed before me this _	day of, 200 MAR 2 2 2006	ز -
· ·	CPI	
Z .		
	(Signature)	