

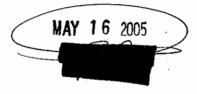
## DEPARTMENT OF THE ARMY OFFICE OF THE COMMAND JUDGE ADVOCATE 116th BRIGADE COMBAT TEAM, 42nd INFANTRY DIVISION KIRKUK, IRAQ, APO AE 09368

24 April 2005

Foreign Claims Commission

a FY05-I9B-872

Hawija, Iraq



Mrs.

I have considered your claim under the Foreign Claims Act, Title 10 United States Code Section 2734 as implemented by Army Regulation 27-20, Chapter 10.

Your claim is denied. The Foreign Claims Act does not authorize payment of claims related to combat activities, nor of claims where US negligence cannot be established. Your claim states that your son was shot and killed by Coalition Forces in the Hawija Market. The U.S. cannot pay your claim because there is no record that Coalition Forces were involved in a firefight on that date. I am sorry for your loss, and I wish you well in a Free Iraq.

Army Regulation 27-20 provides you the right to appeal this action. Deliver your appeal and any additional evidence to the Government Building FCC office within thirty (30) days of receipt of this notice.

Sincerely,

CPT, U.S. Army

Foreign Claims Commissioner

	T FOR I	DAMAGE .OR	INSTRUCTION: Please read carefully the instruction on the reverse side and supply? information requested on both sides of this form. Use additional sheets (s)  person F  m approx  MEC					
AMER		OF THE ACCIDENT HE MARKET OF HAWEJA KIRKUK			2Name of claimants &Address: HAWEJA KIRKUK			
3.Gender FEMALE		4.DATE OF BIRTH 1962	5.MARITAL ST MARRIED	ATUS	TUS   6.DATE& DAY OF ACCID 13-02-2005		DENT 7.TIME 1.PM.	
a firefigh chest. Alt NOTE:	g to without happend though th	ess's statements, wl ed between the C.F e victim was disabl	. and the anti-C ing he was deaf	.F., & : &dum		o visit his ur victim in his	icles' grave head and	
THE VICTIM WAS A WAGEWORK THE VICTIMS' NAME (								
	<del></del>		PROPERT	Y DAN	IAGE			
WRON	GFULL	Y KILLING IN	THE HEADS	CHE	ST			
	·			·			grape The Color of	
			INJ	URY				
			WITN	ESSES				
NAME			ADDRESS			3		
			THE BOTH WITNESS HAVE A SHOPS WHERE THE INCIDE HAPPENED					
			{					
						•		
	·		Amount of cla	im (IN I	Dollars)		rama podence po care o sur filmo e carego e	
IZA PRO	PERTY	12b PERSON	Amount of cla		Pollars) RONGFUL DEATH	12A		
IZA PRO	PERTY	12b PERSON				12.4		
CERTIFY	THAT AN	OUNT OF CLAIM	VAL INJURY	12c W		BY THE AC	0002	
above an Claim	THAT AN	OUNT OF CLAIM	COVERS ONLY E	12c W DAMAG SATIS	RONGFUL DEATH ES AND INJURY CAUSED	BY THE AC	ODENT OF THES	